



COUNTY BOROUGH OF BLACKBURN

ANNUAL REPORT

OF THE
MEDICAL OFFICER OF HEALTH

For the Year 1959

By

J. ARDLEY, M.B., B.S., D.P.H.

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H E A L T H C O M M I T T E E

THE MAYOR

(Mr. ALDERMAN JOHN M. LOMAX)

ALDERMEN :

CRITCHLEY, J.P.

McNAMEE (Mrs.)

WHITEHEAD, J.P.
(Chairman)

COUNCILLORS :

APPLEBY

DAWSON
(Vice-Chairman)

HARGREAVES

HEYWORTH

HULME

MILLER

McNAMEE (Miss)

POOLE

CO-OPTED MEMBERS:

ASHWORTH, Mrs. P.N.

GORTON, F.

DEWHURST, T., J.P.

O'DRISCOLL, D.M.B., Ch.B.

SOUTHWORTH, H., M.D.

PUBLIC HEALTH OFFICERS OF
THE LOCAL AUTHORITY

Medical Officer of Health and Principal School Medical Officer:

V. T. THIERENS, M.B., Ch.B., D.P.H. (to June)
J. ARDLEY, M.B., B.S., D.P.H., (from June)

Deputy Medical Officer of Health and School Medical Officer:

J. Q. MOUNTAIN, B.Sc., M.D., D.P.H.

Assistant Medical Officer (Full-time)

IRENE S. BAILEY, M.A., M.R.C.S., L.R.C.P. (full time from Feb)
SUSAN HETHERINGTON, M.B., Ch.B. (from Oct)
KATHLEEN KEANE, M.B., B.Ch., M.R.C.O.G., D.P.H., D.C.H. (to June)
EILEEN PARKINSON, M.R.C.S., L.R.C.P., (full time from Aug)

Assistant Medical Officers (Part-time)

M.M. THIERENS,	M.B., Ch.B.
E. L. CARTER	M.B., D.P.H.
C. Y. HOWARTH	M.B., Ch.B.
EILEEN PARKINSON	M.R.C.S., L.R.C.P. (to July)
MARY K. HALL	M.R.C.S., L.R.C.P.
IRENE S. BAILEY	M.A., M.R.C.S., L.R.C.P. (to Jan)
D. S. ROSS	M.B., Ch.B.
MARGARET S. GILBOURNE	M.B., Ch.B.

Part-time Consultant Medical Officers:

A. L. McADAM,	M.D. (Cardiology)
J. EVANS,	F.R.C.S., (Oto-Rhinology)
E. J. MITCHELL	M.D., Ch.B., D.O. (Ophthalmology)
L. REED,	M.A., M.B., B.Ch., M.R.C.S., L.R.C.P. (Venereology)
J. G. THURSTON,	B.A., M.B., BCh., M.R.C.O.G. (Obstetrics and
R. WARD,	M.D., M.R.C.P. (Chest Physician) Gynaecology)

Dental Officers:

J. RIGBY, L.D.S., (Principal Dental Officer)
J. GREGSON, B.D.S.

Public Analyst (Part-time):

H. DEDICOMAT, F.R.I.C.

Chief Public Health Inspector:	abcd	F. B. ADDY	
Superintendent Nursing Officer:	a	Miss L. M. BROWN, SRN, SCM, H.V.Cert.	
Non-Medical Supervisor of Midwives and Superintendent District Nursing Service:		Miss A. O'CONNELL, SRN, SCM, RFN, QS., HV Cert.	
Superintendent Health Visitor:		Miss M. JONES	SRN, SCM, HV Cert.
Chief Clerk:	a	T. HODSON	
Public Health Inspectors:			
DEPUTY CHIEF INSPECTOR	abc	C. AINSWORTH	
SAMPLING OFFICER	abc	T. G. MARSDEN	
SENIOR MEAT INSPECTOR		Vacant	
FACTORIES & SMOKE ABATEMENT OFFICER	ac	J. PYE (from Dec)	
SENIOR HOUSING INSPECTOR	a	F. FORREST	
ASSISTANT MEAT INSPECTOR	a	T. R. WIGNALL	
SHOPS & OFFICES INSPECTOR		Vacant	
DISTRICT INSPECTORS	ac	D. W. M. MORTEN	
	abc	R. FARRINGTON	
	abc	G. SHAW	
	ab	R. RILEY	
	a	N. MORRIS	
	a	J. HEATON	
	a	G. GREENWOOD (H.M. Forces from June)	
	a	E. DUERDEN (from July)	
Pupil Inspector		F. BRYNING (from July)	
Health Visitors/School Nurses:			
Miss D. DARBYSHIRE		SRN, SCM, HV Cert, QS.	
Miss V. E. GILL		SRN, SCM, HV Cert. QS.	
Miss M. LONGFORTH		SRN, SCM, HV Cert.	
Mrs. G. A. WHITESIDE		SRN, SCM, HV Cert. QS.	
Miss M. DUXBURY		SRN, SCM, HV Cert. QS.	
Miss M. WILSON		SRN, SCM, HV Cert.	
Miss M. THEXTON		SRN, SCM, HV Cert. QS.	
Miss G. P. ODDIE		SRN, SCM, HV Cert.	
Miss I. C. BARLOW		SRN, SCM, HV Cert.	
Mrs. E.E. CROCKFORD		SRN, SCM, HV Cert. (to June)	
Mrs. M. A. MORLEY		SRN, SCM, HV Cert. QS.	
Miss A. M. EDDIE		SRN, SCM, HV Cert.	
Mrs. D. SPEDDING		SRN, SCM, HV Cert. (to June)	
Mrs. E. K. BRIGGS		SRN, SCM, HV Cert. (to June)	

Mrs. M. G. SANDBACH
 Mrs. G. O. CLARK
 Mrs. M. WADDINGTON
 Mrs. A. F. DOYLE
 Mrs. H. G. CUMMINGS
 Mrs. J. HOLGATE
 Miss M. MALLOY
 Mrs. P. HOBBS
 Mrs. E. M. WARD

SRN, HV Cert.
 SRN, SCM, HV Cert. QS.
 SRN, SCM, HV Cert.
 SRN, SCM, HV Cert. (from Nov)
 SRN, SCM, HV Cert. (from Feb)
 SRN, HV Cert. (from July)
 SRN, SCM, HV Cert. (from July)
 SRN, SCM, HV Cert. (from July)
 SRN, SCM, HV Cert. (from Oct)

Student Health Visitors:

Clinic Nurses:

Mrs. N. HINDLE, SRN.
 Mrs. R. E. CARTER, SRN.

Miss A. J. FAY, SRN, SCM, (to July)

Midwives and Home Nurses:

1st ASSISTANT: Miss I. Boswell, SRN, SCM, HV Cert. QS.

Miss T. Armstrong, SRN, SCM.
 Mrs. H. Barratt, SRN, QS.
 Miss E. Butler, SRN, QS.
 Miss D. M. Clark, SRN, SCM, QS.
 Mrs. K. Duckworth, SRN, SCM, QS.
 Miss G. Figge, SRN, SCM, (to July)
 Miss M. Gregson, SRN, SCM, QS.
 Mrs. A. Heap, SRN, QS.
 Mr. T.D.M. Holmes, SRN, QS.
 Miss M. Jenkinson, SCM.
 Mrs. M. Livesey, SRN, SCM, QS.
 Mrs. E. McKay, SRN, SCM, QS.
 Miss E. Pringle, SRN, SCM.
 Miss J. Ward, SRN. (to Jan)
 Mrs. M. Chambers, SRN, SCM, QS.
 Miss K.D. Smith, SRN, SCM. (from Feb. to May)
 Miss S. Horne, SRN, SCM. (from Sept. to Nov).

Mrs. E. Ashton, SRN, QS. (to April)
 Miss J. Butler, SRN, QS.
 Mrs. M. Evans, SRN, SCM, RCN.
 Miss L. Hargreaves, SRN, HV Cert. QS.
 Mrs. E. Hindle, SRN, SCM, QS.
 Mrs. E. Houghton, SRN.
 Miss A. Lees, SRN, SCM, QS.
 Miss T. Murphy, SRN, SCM, QS.
 Mrs. E. Preston, SRN, SCM, QS.
 Mr. J. Robinson, SRN, QS.
 Miss M. Smith, SRN, SCM, QS. (to July)
 Mrs. J. Vickers, SRN, SCM, QS.
 Mrs. H. Rostron, (nee Phillips) SRN, QS.
 Mrs. W. Young, SRN, SCM, QS. (to Nov)
 Mrs. E. Taylor, SCM. (to April)

Miss M. Davies, SRN, SCM. (from Sept. to Nov)

Ambulance Nurse:

Miss S. Graham, SRN, SCM, QS.
 (Pt. time)

Miss H. Matthews, SRN, SCM.
 (Pt. time)

Clerical Staff:

Senior Accounts Clerk: a J. R. Marsden, Senior clerks: F.G. Longley,
 mH. A. J. WILSON, Miss E. Conberbach, Miss C. Haworth, Miss M.
 Darbyshire, m Mrs. W. Whalley. Clerks F. Bryning (to July) J. Young,

mE. Anderson, T. Gregson, Miss D. M. McArthur, Mrs. M. J. Grindrod
 Miss M. Dobson, Miss D. Sharples, mMrs. M. Allton, Mrs. M. Owen,
 (to-Jan) Mrs. M. Aldred, Mrs. J. Davies, (to Apl) Mrs. M. Wilson. Mrs. H.
 Haworth, mMiss M. Atkinson, Miss R. Eatough, Miss D. Markham, Miss
 P. Dewhurst, Miss B. Young, (fr. Dec) Miss M. Southworth, (fr. May) G.
 Sutton, (fr. July) G. Bell (from July).

Mental Health Staff:

Duly Authorised Officers: W. Dewhurst, (to Mar) F. Broadley,
 T. Clark, S.R.N., R.N.M.D. (from Dec).
 Mental Health Worker: Mrs. M. Lawson
 Clerk/Authorised Officer: J. J. Bamber
 Occupation Centre Staff: k. Miss M. Knott (Supervisor)
 Mrs. P. Stewart, L.R.A.M.
 k Mrs. E. Rawcliffe
 k Mrs. J. Holding (Home Teacher)

Physiotherapists: Mrs. M. Kempton, C.S.P. (Sen. Physiotherapist)
 Mrs. D. Yates, S.S.P. (Pt. time) (to May)
 Miss C. M. Valentine, C.S.P. (to Sept)
 Miss E. Hyde, C.S.P. (from Jan)
 Miss M. Horne, C.S.P. (from June)

Ort' optist: Miss A. P. Williams, D.B.O.

Home Help Organiser: Mrs. J. Hinnigan,

Day Nursery Matrons: HOLDEN HOUSE:
 CHURCH HILL HOUSE:
 ALBION STREET: h Mrs. B. Noble
 STANCLIFFE STREET:
 LINCOLN STREET: f Mrs. J. Scholes

Ambulance Station Officer: F. Bannister

Key to Qualifications

a Certificate of the Public Health Inspectors' Education Board	g State Enrolled Assistant Nurse	
	h Nursery Nurse	
b Certificate in Meat and Other Foods	j Certificate of the Royal Medico- psychological Association	
c Smoke Inspector's Certificate	k Diploma for Teachers of Mentally Handicapped Children	
d Certificate in Sanitary Science as applied to Buildings & Public Works	l Certificate of the National Soc- iety of Children's Nurseries	
e Certificate of the Institute of Public Health and Hygiene	m Local Government Clerical Divis- ion Examination	
f State Registered Sick Children's Nurse		

Public Health Offices,
Victoria Street,
Blackburn.

November, 1960.

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting my first Annual Report upon the health of the town, and the work of the Health Department during 1959.

As I only commenced duties in June of that year, statistical information includes activities during the latter part of Dr. Thierens's service. This preamble however, is essentially a personal view of the Service as I found it, and observations on some aspects of possible future development.

Following upon the lines taken by Dr. Thierens, the report is set out as a discursive address to the Chairman and members of the Health Committee, with the report of the Chief Public Health Inspector and statistical data in separate sections.

The tour of inspection of establishments carried out by the Committee in October disclosed many defects and shortcomings requiring progressive re-appraisal and re-organisation, and the principle was accepted of ultimately providing two Health Centres (in the Montague Street and Bottomgate areas) at which clinical and administrative provisions could be made to serve the west and east halves of the town respectively, thus making available Health Visitors, Midwives, District Nurses, Home Helps and Invalid Aids to supplement the General Medical Practitioner services as a concerted team effort.

STAFF

(a) Medical Officers

In order to further the above development, the practice of relying upon part-

time and sessional Medical Officers was abandoned, and steps taken to obtain the services of four full-time Assistant Medical Officers of Health, it being envisaged that two would be based on each of the Health Centres, from which they would be deployed to schools, Welfare Centres, Day Nurseries, etc. as required. It is hoped that this staffing arrangement will be effected by mid-1960.

During 1959, Dr. Susan Hetherington joined the full-time staff, whilst Dr. Eileen Parkinson, who had worked for the department for so many years on a part-time basis, also became full-time in August. In June, Dr. Kathleen Keane, on the staff since 1954, left to take up a promotion appointment with Worcestershire, and with her go the best wishes of all her colleagues.

(b) Public Health Inspectorate:

At the year end the staffing situation was satisfactory. An appointment of a Factories and Smoke Control Inspector had been made in December, and only the continuing inability to obtain a Senior Meat Inspector caused real difficulties in working arrangements in our attempt to maintain a 100% inspection of through-put at the Abattoir.

(c) Health Visiting:

At the year end the establishment of 24 Health Visitor/School Nurses was only one short of attainment. In recent years staff wastage has been slowly overhauled by recruitment, in the main by the qualification of bursary students. However, in 1960, no students will be available to counterbalance two anticipated losses by retirement. This, together with protracted illness, will reduce the number of Health Visitors actually on duty to a point which will seriously undermine a service which has been so effectively built up. This will be a great pity, as the Blackburn Health Visiting Service is as comprehensive as any I have seen. Indeed, it is because the service is so embracing that, even fully staffed, the Health Visitors would find it difficult to cover their commitments adequately. The increasing after-care service, the prospect of more intensive work in the mental,

health field under the Mental Health Act, 1959, and the poliomyelitis vaccination programme to cover persons aged 6 months to 40 years, as well as the demands of Health Education, merit special consideration at an early date to determine the appropriate establishment. In the meantime, routine visiting must undergo modification, and be limited in favour of selective visiting, whilst certain of the Visitors must be made more mobile by use of cars.

(d) Midwives

At the end of 1959 six midwives were employed (against an establishment of nine).

Four of the midwives live within their districts, the remainder are resident at the District Nurses' Home, St. Peter Street. During the year sixteen pupil midwives attended the District Nurses' Home from Queen's Park Hospital for their domiciliary training. Even so, the shortage of personnel (a national problem) places the service under heavy pressure at certain times of the year. This will be appreciated when it is realised that Blackburn Midwives attended 568 deliveries in the year. The Midwives also continued to carry out their own Ante-Natal examinations at the District Nurses' Home, whilst an Assistant Medical Officer attended on one session per week. A fortnightly post-natal clinic was also held at which the Midwives attended.

(e) Home Nurses

At the end of the year fifteen home nurses were employed full-time, and a further five on a part-time basis. (Full-time equivalent - seventeen and a half). The establishment is twenty-five nurses.

Of the 81,829 visits made during the year, a very high proportion (51,790) were made to patients over the age of 65 years, and no less than 33,381 were for the purpose of giving injections. In view of the heavy commitments, the decline in staff and the continuing trend in favour of caring for the ageing population, consideration may well have to be given to the employment of state Enrolled Assistant

Nurses for duties of a limited nature, to free the State Registered, Queen's trained Nurses for more specialised tasks.

MATERNITY AND CHILD WELFARE

The Report of the Maternity Services Committee (The Cranbrook Report) set up to review the organisation of the maternity services in England and Wales was published in February, 1959, and made several recommendations of particular concern to local health authorities. In view of the controversial nature of some of these recommendations, the Minister recognised that their implementation would be consequent upon consultation with authorities and organizations involved.

CRANBROOK REPORT

Examples of the controversial recommendations were: -

- (a) Reduction of the minimum lying-in period as prescribed by the Rules of the Central Midwives' Board to ten days.
- (b) Amendment of the Central Midwives Board Rule regarding the definition of a "Maternity Nurse".
- (c) The gradual replacement of the local health authority medical officer by the General practitioner obstetrician in ante-natal clinics.
- (d) Reservation of the use of local authority ante-natal clinics for doctors on the obstetric list.

The report made many references to co-ordination and co-operation, the former is dependent on the latter and the latter on rather more than "lip service". One hopes that members of the proposed local Maternity Liaison Committee will escape from the confines of their National Health Service Act. Part II, Part III or Part IV self-interests in the interest of the confined patient.

The standard of ante-natal care available through the Local Health Authority arrangements is very high. The normal procedure for booked cases is for examination to be carried out monthly until the 28th week of

ANTE-NATAL CARE

the pregnancy, then fortnightly until the 36th week, thereafter weekly until delivery. The initial examination includes testing of blood pressure, taking of venous blood for haemoglobin, Kahn, and Rh. testing, reference for chest X-ray and dental examination and arrangement for attendance at the Physiotherapist's relaxation exercise classes and health education in mothercraft by the Superintendent Health Visitor. The attendance of Mr. Thurston, Consultant in Obstetrics, Dr. McAdam, Consultant Physician, and Dr. L. Read, Consultant Venereologist, from the Blackburn Hospital Group for regular sessions at the Ante-Natal Clinic enables doubtful and difficult cases to be referred for their specialised advice and attention. I must express my gratitude to these Consultants for the undoubted benefits they confer upon this service and hereunder is the report of Dr. Read.

"During the year 1959, 145 new patients attended the ante-natal discharge clinic.

	Male	Female
Total New Cases	2	143

The two male cases were normal babies born to syphilitic mothers who were under treatment during their pregnancy. The one hundred and forty-three female cases were divided as follows:-

- 2 cases of syphilis
- 89 cases of vaginal discharge which required treatment
- 60 cases of vaginal discharge which were found to be normal

Of the two new cases of syphilis one was found to be a neuro-syphilis and in no way infectious. The other was a case of very early highly contagious syphilis, and as a result of contact tracing from her, three other cases of primary syphilis were discovered. As this case only attended the clinic on account of a routine blood test, it certainly shows the value of such a test.

Total attendances amounted to 374 with a further 40 intermediate treatments given by the nursing staff.

On the pathological side, blood serum was tested in 134 cases, and smears and cultures to exclude gonorrhoea taken in 140 cases.

My thanks are due to your Superintendent, Miss Jones and her staff, Miss Derbyshire and Miss Gill, for their local co-operation".

Lucien Read.

Venereologist".

The relevant details of all ante-natal cases are communicated to the patient's general medical practitioner, and the copy of the case history is taken to the home of the patient prior to delivery to be available to either the family doctor or the general practitioner-obstetrician, should he be called to the confinement.

The Local Health Authority continued to assess the need for hospital confinement on social grounds and approximately 65% of mothers had their babies in hospital based on social or medical need, this being about 5% short of the arbitrary figure of 70% recommended in the Cranbrook Report. Even so the hospital maternity units were hard pressed to cope with their commitments and rapid turnover and earlier discharge of some patients emphasised the domiciliary staffing difficulties as the local authority midwives were required to supervise the residue of the lying-in periods for these patients.

The Child Welfare Service has many parts, all directed to the common aim of CHILD WELFARE encouraging the development of healthy and happy children, the key field officer in this service being the Health Visitor. She has matured from her early pre-occupation with the physical well-being of the child, in particular his weight and height, feeding and vitamin requirements, to the modern concept of an all-purpose visitor interested no longer in the child as it were in a vacuum but in relation to other members of the family and the community, with important and rather labile emotional and psychological attributes requiring recognition. This slow evolution received a forward impetus in the 1959 Mental Health Act which is likely to require the Health Visitor to direct her attention "to preventive family psychiatry", and to this end she must be re-educated. She is also increasingly concerned through the care and ~~after-care~~ services with older members of the family, particularly the aged, and already in 1959 these visits amounting to some 3,835 equalled all the visits to ~~one-year-old~~ children in the Borough.

The Health Visitors in 1959 by 1,105 attendances at Infant Welfare Centres achieved items of service to 38,137 infants, whilst home visits to the same age

groups numbered 15,818. There would appear to be economic advantages in channelling care of the aged into family welfare centres too, and a considerable measure of success in this direction was contrived at the Glenluce Centre on the Shadsworth Estate where the Health Visitor ran an old persons' "Health Education Club" for 25 sessions in the year and gave 25 health talks. The benefits of the talks themselves, the helpful supervision and the stimulus to mobility of thought and action were very apparent, the service being well appreciated by the old people and their relatives. This type of arrangement is facilitated by having local authority-owned clinics rather than rented Church halls so that extension of the development will be restricted until new centres can be built.

HOME NURSING HOME HELPS INVALID AIDS

These three vitally important services supplement the general medical practitioner service to produce in the community conditions for caring for patients in their home similar to those prevailing in hospitals, namely, an efficient nursing service to carry out techniques of general nursing care, associated with surgical and medical dressings, injection of antibiotics, diuretics, stimulants, hormones, vitamins, insulin, morphine, etc., under the direction of the doctor; the home help service which sees to the general domestic management of the household including the preparation of meals; the invalid aid service which makes available items of equipment required for the nursing of the patient.

One hears a great deal about and is constantly exhorted to give consideration to co-operation, co-ordination and liaison on the health services but it may be said, without fear of contradiction, that the above three services can contribute more to harmonious relations between the parts of the service than all the platitudes, however well expressed. These three services form, together with the midwifery service, the common ground or point of contact with the general medical practitioner, and the services must be adequate, efficient and readily obtainable

with the minimum of fuss and red tape.

I have already made reference to the Home Nursing Service under-staffing. They HOME HELPS have high standards of training and conduct but the same cannot be said of the Home Help Service. The members of this service have hitherto had no training programme, no standard to which they could aspire and singularly little recognition by way of status. Under such conditions the "Home Help" becomes denegated to "Domestic Help" and in consequence there is loss of efficiency and a high sickness rate. It is hoped that in the not too distant future this service can be organised through "in service" training to provide a more uniform standard of conduct, to acquire pride in itself and its appearance and greater efficiency in its deployment. It is remarkable how, under the adverse circumstances prevailing, so many members of the service develop a dedication to the work, in particular in caring for old people.

There are certain aspects of the caring for the sick and infirm in their homes where the present service seems inadequate, e.g. (1) many old people are incontinent and consequently have a high soilage rate of bedding and clothing. They cannot cope with this themselves and if the home help is to deal effectively with the situation she needs available the resources of Health Department organised laundry facilities. This might well be linked with the laundry training scheme for adult female subnormal persons under the Mental Health Act. (2) Chronic illness may have reduced a patient's capacity to run the home to the state where there are grossly insanitary conditions in the house, with accumulations of dirt and rubbish far beyond the ordinary attention of a home help. Special arrangements are required to meet this situation. (3) Long-term illness may throw such a strain on the other members of a household who are sitting up at night and working during the day that there will be a break-down of home care unless occasional relief can be afforded by means of a specially selected "night-sitter".

IMMUNISATION AND VACCINATION

Vaccination against poliomyelitis made increasing demands on the service

during 1959. The number of persons requesting vaccination in the 15-26 age group, POLIOMYELITIS in common with most other authorities, had been disappointingly low, despite national and local propaganda, until the death of a well-known Midlands footballer from the disease. This event stimulated a flood of applications necessitating further relaxation of the diphtheria "booster" programme in order to concentrate on meeting the "polio" demand. The greatest problem was lack of suitable accommodation to deal with large numbers and, although great efforts were made to cope with demand at the Health Department, the poliomyelitis booster programme also began to fall behind. During the mid-term week in November, therefore, St. Paul's School was taken over for the entire week and 3,650 children were given their third injection. The willing co-operation of the Managers and of the Care-taker was much appreciated.

At the end of 1958, 9,381 persons had received 2 injections, whilst 764 had received re-inforcing doses covering a period of almost three years. At the end of 1959 these figures had risen to 19,410 and 9,174 respectively.

In terms of actual injections this means 19,526 injections in the years 1956, 1957 and 1958 compared with 28,423 injections in 1959, no mean achievement by any standard. My thanks are due to the entire staff, medical, nursing and lay for carrying out so willingly all the additional work involved, much of it out of office hours. The inter-dependence of all members of the Health Team was nowhere more evident than in this exercise in mutual co-operation.

The low level of smallpox vaccination (only 878 in 1959) in the community continues

SMALLPOX to be unsatisfactory, particularly in view of the very rapid rate of modern air travel with its ever present danger of importing the disease from endemic areas in Middle and Far East. There is never any "conscientious objection" to the procedure when this might interfere with arrangements for going abroad as witnessed by the number of vaccination documents requiring to be authenticated by the Department each year, rather is it a manifestation of apathy of the general public. It is a sad reflection on human nature that there needs to be the

frightening stimulus of a "Geoff. Hall" or an epidemic to jolt them into activity. However, in the case of smallpox the onset of the epidemic is too late a point in time for the public to think about vaccination. Every member of the Health Department team would be fully committed to the tracing and vaccination of contacts, and the contacts of contacts, a job which would snowball to astronomical proportions rapidly and would properly leave no time for mass vaccination. An added consideration is that artificially induced immunities take time to develop so that procrastination is unwise.

After the immediate post-war propaganda attack on this disease, resulting in wide-
DIPHTHERIA spread immunisation, there has developed an attitude of "laissez faire", a tendency to "rest on one's laurels". This has been furthered by the continued absence of the disease so that it has become a rarity. However, the waning level of immunity in the community can leave us wide open to the resumption of epidemics. Although the poliomyelitis programme in 1959 made appreciable demands on the available staff, it was possible to start the climb back to a safer diphtheria immunity index and 1,667 completed treatments were effected, as against 1,133 in the previous year. Renewed efforts will be made in 1960 to improve on this state of affairs and also to link with it the whooping cough immunisation programme.

AMBULANCE SERVICE

Although the population served and the acreage of coverage was substantially unchanged, the mileage covered by the service increased from 135,260 miles in 1958 to 148,491 in 1959 and the patients carried from 31,522 to 40,022. The decline in miles per patient, so striking from 1949 onwards, has therefore continued to the 1959 low level of 3.7. The fact that it is the policy to equip all vehicles with telecommunication no doubt contributes to this measure of efficiency. The increasing demands on the ambulance service stretch it to its limit at certain peak periods of the day. Increased out-patient clinics at local general hospitals, day care of mentally ill patients at Queen's Park Hospital, and the transport of children to and from the Occupation Centre have all contributed to the problem, which is likely

to further increase as day geriatric hospital provision becomes available and mental health services expand. Over the years it has been possible to adjust the shifts so that the largest number of personnel were available during the periods of greatest demand. However, such adjustments have now reached their limit and the situation is such that there is no flexibility and no reserves and little more can be done without increasing the staff. For example, at least 70 patients are carried between 8.30 a.m. and 10 a.m. every morning to and from points well in our catchment area. In addition there are out of town journeys (Manchester, Liverpool, Preston, etc), which may well start in the peak period and write off an ambulance and crew for a substantial part of the day. Further, although not generally appreciated, it is a fact that eight men are required to keep one vehicle on the road twenty-four hours a day for seven days a week, consequently the staff of 30 men are spread pretty thinly over the 24 hours to cater for daily demands numbering between 150 and 200 patients a day.

At the tour of establishments carried out by the members of the Health Committee in October, 1959, the general consensus of opinion was that the ambulance station was completely unsatisfactory and that consideration should be given to the building of a purpose-designed depot in 1960. I can only say that I am in complete harmony with these sentiments as this is the worst Ambulance Depot I have ever seen.

PREVENTION OF TUBERCULOSIS

The statistics relating to tuberculosis are very interesting. There were notified 57 new cases of pulmonary tuberculosis in 1959 as compared with 66 in 1958 and, whereas 107 were admitted to hospital in 1958, only 41 were so admitted in 1959. This reflects the change in attitude towards the disease so far as therapy is concerned. The antibiotics, together with P.A.S. and Isoniazid, make it possible for an increasing number of patients to receive treatment in the community from their general medical practitioners helped by the District Nursing Service, thus releasing many T.B. beds in hospitals for treatment of other conditions.

Of the 721 thirteen-fourteen-year-old age group in school Mantoux-tested by the Heaf Method, 27% were positive to the test, registering a sensitivity to tuberculosis indicative of prior contact with the disease. Strongly positive reactors were referred to the consultant chest physician for surveillance, the weekly positive reactors remaining under the supervision of the school medical officers.

MENTAL HEALTH

The year 1959 will be associated with the appearance on the Statute Book of the Mental Health Act, an Act to repeal the Lunacy and Mental Treatment Acts, and the Mental Deficiency Act, and to consolidate the provisions for the care and treatment of mentally disordered persons into one enactment, in harmony with current philosophy.

The Act envisages numerous departures from hitherto well established practices in relation to the mentally disturbed, some being in the nature of enlightened progress, others of more doubtful character remain to be judged in the light of experience.

In general, it is anticipated that there will be a shift in emphasis from hospital to community care, and from formal to informal methods of disposal, with a rather more positive attitude to prevention. This pre-supposes expansion of Local Health Authority commitments, both in the field of accommodation and personnel.

The statistics on pages (xlv) to (1) show the magnitude of the mental health problem in Blackburn, where no less than 405 mentally ill patients were in hospital at the beginning of the year, and were added to by a further 354 admissions during 1959. In the same period 395 patients either died or were discharged. In the case of mental defectives, there were 172 Blackburn patients in the community and a further 164 in hospital at the end of the year, 21 new cases having been ascertained during 1959. Of the patients in the community, 11 were on the urgent waiting list for admission to hospital at the end of the year, 5 having been admitted during

1959. A further 4 patients were admitted to hospitals for short periods of temporary care to give parents a holiday or to meet domestic emergencies.

In view of the developing trend in favour of voluntary admission to hospital, and the prospect of even greater resort to informal procedures in the future, some critical comment should be made about inherent difficulties which are likely to increase. The following chart shows the situation in 1959 in relation to Lunacy Act and Voluntary patients.

CHART I

LUNACY ACT PATIENTS

(1)	Average stay in hospital (weeks)	- Sec. 20 & 21	121 patients	1.18 weeks
		Sec. 16	29 patients	16.31 weeks
(2)	Percentage who relapse and need re-admission after discharge	- Sec. 16	55%	
(3)	Average time interval between discharge and relapse (weeks)	-	51.8 weeks	
(4)	Number of after-care visits in 12 months	-	45	

VOLUNTARY PATIENTS (Mental Treatment Act)

(Including "Short Order" cases who became Voluntary Patients)

(1)	Average stay in hospital (weeks)	- Sec. 1. Vol.	325 patients	5.45 weeks
(2)	Percentage who relapse and need re-admission after discharge	-	18.15	
(3)	Average time interval between discharge and relapse (weeks)	-	10.2 weeks	
(4)	Number who have more than two such episodes	-	24	
(5)	Number of after-care visits in 12 months	-	339	
(6)	Average length of time between discharge date and first after-care visit	-	10 days	

July, 1948 to December, 1959 Lunacy Act Patients

Number who have had more than two such episodes	-	72
---	---	----

Mental Treatment Act: Voluntary Patient

Number who have had more than two such episodes	-	66
---	---	----

CHART II

Patients admitted to Hospital on "Short Order" and remained as Voluntary Patients.
 Patients admitted as Voluntary Patients

No. of Patients	Time in Hospital as Voluntary Patients
15	Under 1 Week
16	1 Week
37	2 "
25	3 "
38	4 "
35	5 "
33	6 "
25	7 "
15	8 "
19	9 "
9	10 "
3	11 "
7	12 "
9	13 "
1	14 "
4	15 "
4	16 "
2	17 "
2	27 "
1	28 "
1	29 "
3	31 "
1	33 "

19 Patients admitted as Informal Patients (no record of date left)
 1 Patient admitted as Private Patient (no record of date left)

Whereas in 1959 only 29 patients were detained in hospital under Section 16 of the Lunacy Act, i.e. by order "interfering with the liberty of the subject", there were 325 patients accepting admission of their own volition. The average stay of the former was 16.3 weeks, as against 5.5 weeks for the latter. In fact, 78% of the voluntary patients discharged themselves within 8 weeks, and only 4.6% accepted as much treatment as was considered necessary for the Section 16 patients. This is reflected in the fact that 18.2% of the "voluntary" patients relapsed and needed re-admission within an average time interval of 10.2 weeks, as against the 51.8 weeks (on average) that the "certified" patient lived in the community without further breakdown necessitating re-admission. One appreciates that patients dealt with under Section 16 of the Lunacy Act are persons with little insight into their condition, and in general suffering from more severe mental disturbances, usually psychoses, but after allowing for this, the relapse rate of 55% is significantly high. Some part of the answer to relapse lies in the amount and quality of "After Care." The 45 After Care visits to Lunacy Act patients and 339 to Voluntary patients is totally inadequate to be effective, and the delay of 10 days (average) between discharge date and day of first after care visit too long to contribute to the immediate integration of the patient into the relatively hostile environment of the community after the sheltered environment of the hospital. It is the purpose of after care services to attempt to project the "therapeutic environment" of the hospital into the community, a projection which will be extraordinarily difficult in the face of adverse circumstances such as bad housing, a highly competitive employment situation, and a sadly uninformed climate of public opinion. Added to this is the fact that increasing numbers of patients (20 in Chart II) having sought treatment completely informally will not be brought to the notice of the local authority After Care Service on discharge and will thus be deprived of help at a critical period in their re-habilitation.

So far as Mentally Defective persons are concerned, by the end of 1959 some 77 were detained in hospital completely on an informal basis.

MORBIDITY AND MORTALITY

Of the notifiable infectious diseases dysentery had the highest nuisance value in 1959 and, because it tended to be a nuisance rather than a threat to life, it was, as usual, under-notified. Measles on the other hand, whilst of limited virulence

INFECTIOUS DISEASES

for the most part, occasionally produced respiratory complications in younger babies and therefore was treated with a healthier respect. Tuberculosis notifications, as mentioned elsewhere, continued to decline. Scarlet fever was of the mild type so typical in recent years and infections of the central nervous system, including poliomyelitis, were fortunately absent.

Cancer of the lung as a cause of death increased from 42 in 1958 to 62 in 1959, 15 of the 20 increase being accounted for in men aged 45 years to 75 years. Deaths

CAUSES OF DEATH

from bronchitis in men of the same age group declined in 1959 from 56 to 42. Cancer in general maintained its high level as a cause of mortality, being responsible for 260 deaths, i.e. a rate of 2.53 per 1,000 of the population. Disease of the circulatory system including heart and peripheral vessels accounted for 871 of the 1634 deaths in the Borough, which is practically the same as for 1953 (877 out of 1635 deaths).

ENVIRONMENTAL HEALTH

Since the report of the Royal Sanitary Commission of 1869 it has been generally considered incumbent upon a water undertaking to ensure a wholesome and adequate water supply. The outbreak of typhoid in Blackburn in 1881 demonstrated the danger

WATER SUPPLY

inherent in not having adequate filtration plant, and although this serious defect has not yet been remedied, great faith has been placed on the bacteriocidal effects of chlorination. However, chlorine in the low proportions desirable for a drinking water is ineffective unless it is given adequate "contact time" to react

upon possible contaminants. The circumstances of the Blackburn system are such that this "contact" or holding period can not be guaranteed. It is therefore with pleasure not unmixed with relief that I look forward to the anticipated amalgamation with the Fylde Water Board and the linking up with its filtration and treatment plant. I am indebted to the Water Engineer for the appended report upon the water supply during 1959, and also to the Borough Engineer for the report of the Public Baths:

REPORT I

"Whereas the year 1958 was a good Waterworks year, 1959 has been the reverse. It has brought difficulty to many water undertakings in the country, including Blackburn.

The rainfall in every month of the year except December has been below normal, the total of 46.75 ins. being 70.6% of the average. It was particularly low from January to September, inclusive, amounting to only 49.9% of the average for that period.

Consumption maintained the high level reached last year and was remaining at about $7\frac{1}{2}$ m.g.d. during the early months. It dropped to about 7 m.g.d. between March and August, and resulting from an extensive economy campaign, it was further reduced to a minimum of $5\frac{1}{2}$ m.g.d. in October. It has since increased again to about $6\frac{1}{2}$ m.g.d.

The flow into the reservoirs was less than the demand almost continually from January to mid-October, in spite of the fact that from the latter end of July until November water was being purchased from the Fylde Water Board. The stock at 1st January, 1959, was equivalent to 82 days' supply. It fell to a minimum of 24 days on October 17th, recovering to 42 days on 31st December. This is 28 days lower than is considered the safe amount if the stock is to be adequate for a possible dry summer next year.

In the year ending 31st March, 1959, the undertaking supplied a population of 120,900 with 56.63 g.p.d. including 25.59 g.p.d. for industry. A net increase of 220 was shown in the number of properties connected to the system.

Further developments have taken place in the process of amalgamation of water undertakings, so that it is now certain that Blackburn Waterworks will become a part of the new Fylde Water Board from 1st April, 1960. A Divisional office is to be maintained in Blackburn, where matters relating to water supply in the Borough will continue to receive attention as at present.

REPORT II

"The Blackburn Public Baths Department comprises three swimming pools, one 75 ft. x 25 ft., one 75 ft. x 30 ft., one 60 ft. x 34 ft., 73 slipper (private) wash baths, one Russian bath, 3 foam bath suites, 3 establishment laundries.

The source of water supply is by town's mains drinking water.

The filtration plants at two of the swimming pools are of modern construction, and are capable of changing the whole of the bath water every $3\frac{1}{2}$ hours. Special outlets are installed to take surface water from the pools at any rate as, or when required, depending upon conditions, or by interchanging valves the water may be taken from the bottom of the bath in the orthodox manner.

At the other bath the "turnover" period is 5 hours, operated day and night.

Filtration is assisted by the addition of limited dosages of sulphate of alumina and the pH value maintained by required quantities of sodium carbonate and bi-carbonate injected in solution into the main suction pipes by the most modern chemical dosage plants.

Sterilisation of the bath water at all the baths is effected by chlorine gas injected by modern plants into the main return flow (after filtration) to the inlets of the pools.

The amount of chlorine gas required to maintain complete sterilisation of the bath water can be regulated to suit conditions such as "breakpoint" or free residual chlorine, or combined residual chlorine.

Samples of bath water are tested every 2 hours throughout the whole of the bathing periods to determine the amount of chlorine present.

GENERAL SANITARY CIRCUMSTANCES

I am indebted to the Chief Public Health Inspector for details of the sanitary circumstances set out in his Report in Part II which follows and in particular for his comments on slum clearance, clean air and food hygiene.

It is probably correct to say that there is no field of human endeavour so vital in contributing to the health and happiness of a community as the provision of satisfactory housing accommodation. There is an unfortunate legacy of the "Industrial Revolution" in Blackburn in the nature, quality and disposition of many of its houses and it is questionable if a programme of replacement established at 200 per year will ever bring in this century the ideal state of affairs where really substandard dwellings have disappeared. It must be realised also that slum clearance activity is fundamentally based on the 1936 Act assessment of desirable

standards. These concepts were outdated then and a quarter of a century has elapsed since. One holds on to the ambition to be able at some point in time to look forward rather than back over one's shoulder, but the burden of "cost" will be heavy for many years to come.

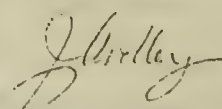
In the important matter of "Clean Air" there is no one who would argue that it is anything but desirable to be able to enjoy the benefits of an unpolluted atmosphere. The annual exodus of people to the seaside each summer and the movement to like places on retirement is a clear indication of the search for a more beneficial environment. If it is worth having for this limited objective it is worth having for the whole year. It is attainable within the administrative framework of the Clean Air Act.

There are parts of Blackburn where at certain periods of the year many tons of soot are deposited per square mile per month. The housewife is painfully aware of this from her constant struggle to overcome its deleterious effects on the family wash, the soft-furnishing fabrics, the paintwork and the furniture, as well as the insult to her appearance by the clinging grime she cannot help but pick up on shopping excursions into the town. These have serious economic consequences which, added to the obviously harmful health effects on Bronchitis, Asthma, Pneumonia and Cancer incidence, make it imperative that everyone should press for the implementation of the Act.

In conclusion, may I record my grateful thanks to all members of the staff for their co-operation and assistance during my first year of office. To the members of the Health Committee in general and the Chairman and Vice-Chairman in particular, I tender sincere thanks for their encouragement, courtesy and help.

I am, Mr. Chairman, Ladies and Gentlemen,

Your Obedient Servant,


Medical Officer of Health.

PART I

VITAL STATISTICS

VITAL STATISTICS

Area (in Acres)	8,088
Population (Census, 1951)	111,218
" (Estimated middle of 1959)	
Total Dwellings Occupied	36,551
Dwellings wholly vacant	796
Total Dwellings Occupied and Vacant	37,347
Number of Private Households	37,249
Rateable Value	£ 1,092,264
Sum Represented by a Penny Rate	£ 4,155
Rate in the £ (excluding Water) 1958 - 1959:	21/9

Gross expenditure on Health Services to 31.3.59:

Health Services 1946 Act Account	£ 169,192)	£ 194,163
General Account	£ 24,971)	

Income on Health Services to 31.3.59:
including Government Grant and excluding Rate Aid:

Health Services 1946 Act Account	£ 94,320)	£ 96,959
" " General Account	£ 2,639)	

Net Expenditure on Health Services to 31.3.59:

Health Services 1946 Act Account	£ 74,872)	£ 97,204
" " General Account	£ 22,332)	

(Legitimate 1496) M 826)	
Live Births	Birth Rate 14.95
(Illegitimate 88) F 758)	
Total 1584	

Number of women dying in, or in consequence of,
childbirth, from -

Sepsis	- (0.62)	per 1,000
Other Causes	1	births and stillbirths

Stillbirths	37
Rate per 1,000 total births	22.82

Deaths (M 790)	1634	Death Rate	15.43
(F 844)			

Percentage of total deaths occurring in institutions		41.8
Deaths of infants under one year per 1,000 live births		
Legitimate	31	20.72
Illegitimate	5	56.82
All infants	36	22.65
Death Rate from Measles (all ages)		Nil
" " " Whooping Cough (all ages)		Nil
" " " Diarrhoea (under two years of age)		Nil
" " " (per 1,000 live births)		
" " " Cancer (all ages)		2.53

The Births registered were 1584 of which 88 were illegitimate. The total male births were 826, and female 758. The birth rate was 14.95 per 1000, compared with 16.5 for England and Wales.

The total number of deaths registered was 1634, of which 790 were males and 844 females. The deathrate was 15.43 per 1000, compared with 11.6 for England and Wales.

C A U S E S O F D E A T H

During 1959, the chief causes of death were:-

Disease	No. of deaths	Deaths per 1000
Organic Heart Disease	266	2.51
Cancer	268	2.53
Bronchitis	95	0.89
Vascular Lesions of Nervous System	292	2.75
Circulatory System	260	2.45
Pneumonia	70	0.66

Diseases of bodily systems and group diseases to which death was assigned are as follows:

Disease	No. of deaths	Deaths per 1000
Respiratory System (Non-Tubercular)	183	1.72
Circulatory System	260	2.45
Nervous System (Non-Tubercular)	292	2.75
Cancer	268	2.53
Tuberculosis (All Forms)	10	0.094
Renal System (Non-Tubercular)	27	0.25
Infectious Diseases	Nil	-
Digestive System	12	0.11

TABLE 1

DEATHS REGISTERED DURING THE CALENDAR YEAR, 1959:

Deaths at the subjoined ages of "Residents"
Whether Occurring within or without the Borough

CAUSES OF DEATHS	Under One		1-5 years		5-15 years		15-25 years		25-45 years		45-65 years		65-75 years		Over 75 years		All Ages
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
1. Tuberculosis, Respiratory									1	1	1			3	1	2	9
2. " , Other										1							1
3. Syphilitic Disease									1				1	2			4
4. Diphtheria																	
5. Whooping Cough																	
6. Meningococcal Infections																	
7. Acute Poliomyelitis																	
8. Measles																	
9. Other Infective and Parasitic Diseases																	
10. Malignant Neoplasm - Stomach										1	9	5	10	11	8	12	56
11. " Lung; Bronchus									2		28	4	19	4	5		62
12. " Breast									3		9		7			6	25
13. " Uterus											6		5			4	15
14. Other Malignant & Lymphatic Neoplasms										5	15	22	15	14	18	19	108
15. Leukaemia, Aleukaemia							1		1								2
16. Diabetes							1				4	4	2			2	13
17. Vascular Lesions of Nervous System							1		6	1	23	15	41	47	55	103	292
18. Coronary Disease, Angina									3		60	16	42	49	41	55	266
19. Hypertension with Heart Disease										1	4	6	8	13	3	18	53
20. Other Heart Disease				1			1	1	1	1	17	13	14	34	52	72	207
21. Other Circulatory Disease		1									2	2	6	6	12	24	53
22. Influenza											3	1	4	3	3	3	17
23. Pneumonia	2	1							1	2	8	5	9	9	14	19	70
24. Bronchitis					1				1	19	5	23	16	18	12		95
25. Other Diseases of Respiratory System									1	1	3	1	8	1	1	2	18
26. Ulcer of Stomach and Duodenum												1	2		2	2	7
27. Gastritis, Enteritis and Diarrhoea												1			1	3	5
28. Nephritis & Nephrosis							1		2			1		5	2	2	13
29. Hyperplasia of Prostate											3		2		9		14
30. Pregnancy, Childbirth, Abortion												1					1
31. Congenital Malformation	4	8	1	1	1										1		16
32. Other Defined and Ill-Defined Diseases	14	5	2		1	2	3		2	2	18	8	9	10	18	37	131
33. Motor Vehicle Accidents							1				2		1	1		2	7
34. All Other Accidents		1	1		2		1		2		5	2	3	6	9	16	48
35. Suicide							3				7	6	3	3	1		23
36. Homicide & Operations of War							1				1		1				3
	20	16	4	1	5	3	9	6	23	19	59	13	42	15	25	127	415

TOTAL DEATHS IN INSTITUTIONS IN THE DISTRICT OF

(RESIDENTS OF THE BOROUGH 683
(NON-RESIDENTS 599)

PART II

SANITARY CIRCUMSTANCES

(Report of the Chief Public Health Inspector,
Mr. F. B. Addy).

H O U S I N G

(a) GENERAL

Houses built during 1959:

(i) By Corporation:	Houses	234
(ii) By Private Enterprise:	Houses	63
	TOTAL	<u>297</u>

(b) STATISTICS

1. INSPECTION OF DWELLING-HOUSES DURING THE YEAR:

(1) (a)	Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	839
(b)	Number of inspections made for the purpose	3532
(2) (a)	Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	15
(b)	Number of inspections made for the purpose	15
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil
(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	635

2. REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES :-

Number of defective dwelling-houses rendered fit in consequence of informal action by Local Authority or their officers	601
--	-----

3. ACTION UNDER STATUTORY POWERS DURING THE YEAR;-

A. PROCEEDINGS UNDER THE HOUSING ACT, 1936, ss. 9, 10 & 16

(1)	Number of dwelling houses in respect of which notices were served requiring repairs	1
(2)	Number of dwelling-houses which were rendered fit after service of formal notices:-	
(a)	By Owners	1
(b)	By local authority in default of owners,	-

B. PROCEEDINGS UNDER PUBLIC HEALTH ACTS

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	91
(2) Number of dwelling-houses in which defects were remedied after service of formal notices:-	
(a) By owners	90
(b) By local authority in default of owners	5

C. PROCEEDINGS UNDER Ss. 16 & 17 OF THE HOUSING ACT, 1957

(1) Number of dwelling-houses in respect of which demolition orders were made	10
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	4
(3) Number of dwelling-houses in respect of which Closing Orders were made	10
(4) Undertaking accepted not to relet	3
(5) Dwelling-houses demolished voluntarily	12

D. PROCEEDING UNDER SECTION 18 OF THE HOUSING ACT, 1957

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	N11
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	N11

SLUM CLEARANCE

1959 was the fourth of the ten-year Slum Clearance programme, during which the remainder of the Montague Street Area was represented as unfit. This brought the total number of houses represented in the first four years of the programme to 631. In addition, 173 houses were purchased for demolition by negotiation, and a further 81 houses dealt with as individual unfit houses. Thus, a grand total of 885 unfit houses had been dealt with by the end of the year, a figure well up to programme, which it is hoped will be maintained during the coming years.

Re-housing and clearance of the sites is a much more lengthy process. As will be seen from the progress report on page (ix) the Brunswick Street Area, represented in 1956, was finally cleared during 1959, much of the delay being due to the difficulties in obtaining suitable accommodation for old couples and persons living alone. The erection of many more old persons' bungalows or ground floor flats would help to obviate this delay. In fact, during 1959, there was a marked increase in priority applications for ground floor accommodation from elderly people who find it increasingly difficult to cope with an ordinary dwelling house but would be quite able to look after themselves in more suitable surroundings.

TABLE 2

PROGRESS REPORT - SLUM CLEARANCE

TO DECEMBER 31st, 1959.

Name of Area	Date of Representation	No. of Premises Represented	Date of Confirmation of Order	No. of houses still Occupied	No. of Premises not yet Demolished	Date Site Cleared
Brunswick Street	12. 3.56	1st Year 80)	21. 3.57	-	-	August, 1959
Gregson Lane	12. 3.56	7) 112	6.12.56	-	-	October, 1958
Dock Street	12. 3.56	25)	18. 2.57	-	-	June, 1958
Burnley Road No. 1	18. 2.57	2nd Year 71)	3. 3.58	1	4	
Burnley Road No. 2	18. 2.57	7)	3. 3.58	-	-	September 1959
Crown Street	17. 6.57	23) 110	26. 2.58	-	-	
3 to 19 Crown Street. Informal undertaking by owners to demolish Dated 30.4.57		) ) ) ) ) ) 9)))				August, 1959
George St. West No. 1	14. 4.58	3rd Year 6 )	(	-	-	December, 1959
Addison Street No. 1	14. 4.58	12 )	(	2	12	
Leyland Street No. 1	14. 4.58	9 )	(	3	9	
Greaves Street No. 1	14. 4.58	2 )	(	1	2	
Greaves Street No. 2	14. 4.58	8 )	(	2	8	
Blakey Street No. 1	18. 8.58	9 )	(	7	9	
Blakey Street No. 2	18. 8.58	35 )	(	25	35	
Blakey Street No. 3	18. 8.58	2) 186	(Not yet confirmed	2	2	
Blakey Street No. 4	18. 8.58	18 )	(	16	18	
Blakey Street No. 5	18. 8.58	61 )	(	48	61	
Blakey Street No. 6	18. 8.58	2 )	(	2	2	
Blakey Street No. 7	18. 8.58	3 )	(	3	3	
Layland Street No. 2	20.10.58	)	(	2	17	
King Street No. 1	20.10.58	17) 2)	(12.10.59	1	2	

Name of Area	Date of Representation	No. of Premises Represented	Date of Confirmation of Order	No. of houses still occupied	No. of Premises not yet Demolished	Date Site Cleared
Montague St. No. 1	16. 2.59	4th Year 90 )	(	73	90	
Montague St. No. 2	16. 3.59	3 )	(	3	3	
Montague St. No. 3	16. 3.59	11 )	(	5	11	
Montague St. No. 4	16. 3.59	6 )	(	6	6	
Montague St. No. 5	16.11.59	6 )	(	5	6	
Montague St. No. 6	16.11.59	10) 223	(Not yet confirmed	5	10	
Montague St. No. 7	16.11.59	12 )	(	9	12	
Montague St. No. 8	16.11.59	7 )	(	6	7	
Montague St. No. 9	16.11.59	69 )	(	59	69	
King St. No. 2	7.12.59	9 )	(	8	9	
		Total				
		631				
Individual Unfit Houses Represented during 4 years.		81				
Houses acquired for demolition by negotiation		173				
		Total				
		885				

SANITARY INSPECTION OF THE AREA

During the year, a total of 18,713 visits and inspections were made by the Public Health Inspectors:

No. of complaints received	1116
Total number of defects dealt with	1676
No. of notices served	691
No. of notices complied with	594
No. of drains tested	362

Tents, Sheds, Caravans, etc. At the end of the year there were fifteen caravans in the Borough used for human habitation.

Offensive Trades. The number of offensive trades is fourteen. These consist of eight Bone and Rag and Bone Dealing, three Fat Extracting or Fat Rendering, one Gut Scraping and two Tripe Boiling. There are also two Knackers Yards. All are visited regularly.

Insanitary Dwellings. Seventeen houses were closed during the year as being unfit for human habitation.

Verminous Premises and Persons. One hundred and twenty-seven private dwelling houses comprising three hundred and ninety-eight rooms have been disinfested. Forty-one infested persons were treated at the Cleansing Clinic.

Infected Premises. Two hundred and thirty-nine private dwelling houses comprising five hundred and three rooms and four hospitals and one school have been disinfested following cases of infectious diseases.

Common Lodging Houses. During the year a further common lodging house for men was opened, bringing the total to 6. The number of beds now available is 210, as shown below:

<u>Address</u>	<u>Maximum number of Male Lodgers.</u>
11/13, Birley Street	26
74, King Street	37
6/8, Mount Pleasant	31
42, Eccles Street	18
20, Regent Street	71
2, Grimshaw Park	27
Total	<u>210</u>

With the exception of the one newly opened, all the lodging houses are normally filled by the semi-permanent type of lodger, usually the poor elderly man with no family who makes

a lodging house his home. The true vagrant seems now to have almost disappeared. Generally speaking the lodging houses are quite well run, but as might be expected the standard of accommodation varies.

Houses-Let-in-Lodgings. There are 19 such premises which provide 121 rooms with a 98 per cent. occupancy. The general standard of accommodation is low.

Smoke Abatement. During the year five hundred and thirty-five smoke observations were made of factory chimneys; in eighty-one cases smoke was emitted in such quantity as to be a contravention of the Clean Air Act 1956. In all cases, warning letters were sent.

Canal Boats. The Corporation have carried out, within their District, the provisions of the Public Health Act, 1936(part X) :

- (1) They have maintained in office an Inspector, Mr. Frederick Basil Addy, appointed for the execution of the said Act.
- (2) One canal boat has been examined and reported thereon.
- (3) No infringement of the Act came under the notice of the Inspector.
- (4) There has been no occasion to take legal proceedings.
- (5) No written intimations have been served.
- (6) No cases of infectious diseases were met with.
- (7) There was no detention of boats for cleansing and disinfection.
- (8) There are twenty-three canal boats on the register.

RODENT CONTROL

Surface Infestation. During the year 669 complaints and requests for disinfection were dealt with and 6605 premises surveyed for evidence of infestation. In all, a total of 536 treatments were carried out.

Rodent Control in Sewers. During the year maintenance treatments for rats in sewers have been carried out during the periods April/July and October/December.

RENT ACT 1957

This Act came into operation on 6th July, 1957, and was brought in to amend the Rent and Mortgage Interest Restrictions Acts 1920 to 1939 and other enactments relating to the control of rents and the right to retain possession of houses. Whilst the Act deals in the main with matters relating to landlord and tenant, it makes provisions whereby a tenant may, under certain circumstances, make application to the Local Authority for a certificate of disrepair.

Eighty-one such applications have been dealt with during the year.

No. of applications received for Certificates of Disrepair	81
Notifications of Intention to issue Certificates of Disrepair	81
Undertakings received from owners	59
Undertakings accepted	59
Number of Certificates (Form L) issued	25
Number of applications received for cancellation of Certificates of Disrepair	36
Applications granted	25
Applications refused	7
Applications still under consideration	4

FACTORIES ACT, 1937, AND THE SANITARY ACCOMMODATION REGULATIONS, 1938

Seven hundred and seven power factories and sixty-three non-power factories are on the Register kept by the Department. During the year twenty-one factories have been inspected. Where contraventions of the Act were found, the occupiers of the factories concerned were notified, and requested to take appropriate steps to comply with the Act.

Table 3

DETAILS OF INSPECTION MADE	Power	Non-Power	Other Premises
Number of factories on the Register	707	63	35
Number of factories inspected	12	4	5
Number of re-visits to factories	17	3	1
Number of factories found satisfactory	4	2	4
Number of factories where contraventions were found	8	2	1
Number of factories where contraventions have been remedied	5	1	1

CONTRAVENTIONS OF THE FACTORIES ACT, 1937

and

THE SANITARY ACCOMMODATION REGULATIONS, 1938

	Number of Contraventions found	Number of Contraventions Remedied
Sec. 1. CLEANLINESS		
Dirty condition of workrooms	-	2
Sec. 6. DRAINAGE		
Ineffective drainage of floors	-	-
Sec. 7. SANITARY CONVENIENCES		
Absence of sanitary conveniences	-	-
Sufficient sanitary conveniences not provided	-	-
Suitable sanitary conveniences not provided	-	-
Separate sanitary conveniences not provided for each sex	-	-
Sanitary conveniences not effectively lighted	6	4
Sanitary conveniences not maintained in proper repair	-	2
Sanitary conveniences not kept clean	9	3
SANITARY ACCOMMODATION REGULATIONS, 1938.		
Sanitary conveniences not ventilated	1	-
Sanitary conveniences in direct communication with the workroom	1	1
Sanitary conveniences not provided with proper doors	2	3
Sanitary conveniences not provided with separate approaches	-	-
Sanitary conveniences not effectively screened	1	-
Sanitary conveniences not indicated with sex of users	1	-
Insanitary urinals	-	-
Sanitary conveniences not conveniently accessible	-	-
TOTAL	21	15

CLEAN AIR

Factory Chimneys

During 1959, five hundred and thirty five observations were made, smoke emission being in excess of that permitted by the regulations in 81 instances. Letters were sent to the managements concerned, and the premises visited. The figure of 81 offences may appear rather high, but many observations were of chimneys which had previously shown excess smoke, whilst others were made to convince the management that some adaptation or alteration was required to boiler plant. A number of factory owners still do not appear to take the provisions of the Clean Air Act seriously, and it may well be that legal proceedings will have to be considered, if only to convince these managements that some action by them is necessary.

Nine factories closed down during 1959, whilst a further 15 factories were "weaving out" or had closure under consideration.

Domestic Smoke

In January, 1959, the Ministry of Housing and Local Government sent to all Local Authorities a circular letter on the establishment of Smoke Control Areas. In this, he invited all Local Authorities in "black areas" to consider and report upon their domestic smoke problem and to decide what smoke control areas were needed. The information had to be submitted by 30th June, and include proposals for the next five years.

As the Minister had designated Blackburn a "Black Area", a programme was prepared and submitted to the Ministry. Briefly, it is hoped that during the first five years, four smoke control areas will be established covering some 430 acres and 4947 dwelling houses. By the end of the year a rough survey of the proposed first area had been made to check the number and description of the

premises within the area. Following the appointment, in December, of an experienced officer as Factories and Smoke Abatement Inspector, it is hoped that considerable progress will be made during 1960.

It is unfortunate that in some neighbouring areas, the public does not appear to have co-operated too well in the matter of smoke control areas. This may be due to adverse publicity, but I am satisfied that if the seriousness of the position is properly explained, the general public will accept that smoke control areas are not a fad but a vital necessity if we are to secure the benefits which will accrue from a cleaner, and therefore, healthier atmosphere.

PART III

FOOD SUPPLY

ICE CREAM

The number of premises registered for the manufacture, sale or storage for sale of ice cream has again increased. During 1959, thirty-eight applications for registration were received.

At the end of 1959, the Register of these premises showed the following alterations:-

Number on Register, 31st December, 1958	... ..	458
Number of Registrations discontinued during 1959	.	5
Number of premises Registered during 1959	... ..	38
Total on Register, 31st December, 1959	... ..	491

Bacteriological Examination. Fifty-two samples were taken for bacteriological examination, of which forty-six came within grades 1 and 2, three in grade 3, and three in grade 4. Four samples contained B. Coli.

Chemical Examination. The Food Standards Ice Cream Order, 1959.

New Regulations governing the composition of ice cream and regulating the method of describing the commodity when offered for sale, came into force during the year.

These Regulations allow various descriptions to be applied according to the ingredients used in the manufacture, the object being to provide the public with an ice cream made entirely from milk products and to enable this to be sold under a special description such as "Dairy Ice". Generally there are now two ice creams on the market, one made exclusively from milk products, and the other from ingredients not completely derived from milk.

The new standard laid down by the Regulations is substantially the same as the Order it replaces except that under the new Regulations no standard is laid down for the sugar content. The present standard is 5% fat and $7\frac{1}{2}\%$ milk solids not fat.

Two samples were submitted to the Public Analyst and both samples were well above the required standard.

Heat Treatment. New Heat Treatment Regulations came into force in 1959. These, in addition to laying down times and temperatures for the Pasteurisation and Sterilisation of ice cream, also fixed an acidity limit for Lolly Ices. When the P.H. value of a lolly ice is above 4.5 the ingredients require to be pasteurised in the manner required by the Regulations. The P.H. value of eight lolly ices has been taken and all were below the legal limit of 4.5.

Five hundred and sixty visits were made to registered premises and thirty-five warnings were given for various contraventions.

D A I R I E S A N D M I L K S U P P L Y

Dairies. Three hundred and thirty visits were made to dairies and fifty-five notices were given for contravention of the Milk and Dairies Regulations.

Farms. Fourteen visits were made to farms in connection with adverse reports on milk samples, and advice given to the farmers concerned.

Milk Vehicles. Fifteen milk vehicles were inspected during the year.

Milk (Special Designations) Regulations, 1949. During the year a total of one hundred and sixty-nine samples of designated milk and seven of undesignated milk were bacteriologically examined.

The following table shows the grades of milk examined and the results of the tests.

TABLE 4

CLASS OF MILK	No. of samples	Number satisfactory	Number not satisfactory	TESTS FAILED			
				Phosphatase	Methylene Blue	Coliform	Biological
Pasteurised	63	51	12	1	2	11	-
Sterilised	16	16	-	-	-	-	-
Tuberculin Tested ..	42	17	25	-	23	17	-
Tuberculin Tested Pasteurised	48	41	7	1	-	7	-
Non-Designated	7	3	4	-	3	2	-
All grades examined for Tuberculosis .	29	29	-	-	-	-	-

Six washed milk bottles were examined and were all reported satisfactory.

Cysticercus Bovis During the year twenty-seven cases were discovered. All were localised cases and after condemnation of the offal, the carcasses were sent to cold storage for a period of not less than three weeks.

Disposal of Condemned Food.

Public Abattoir.

The condemned meat and offals from the Public Abattoir are sold to two local firms of fat melters and fertilizer manufacturers. Such material is either processed within the Borough at premises which are visited weekly, or the material is sold to other processors outside the Borough.

Wholesale Fish Market.

Unsound fish is sold to a fertilizer manufacturer outside the Borough.

Other Foods.

All other unsound foodstuffs are collected and disposed of at the Corporation Refuse Destructor

Special Examination of Consignments

Date	Foodstuff	How affected	Weight
August	Pears	Grossly over ripe	3480 lbs.
November	Ox Tongues	Putrid through breakdown of fridge.	2150 lbs.

Carcases, etc., sent for Utilisation

55 tons 6 cwt. 4 qrs. 27 lbs.

Other Foodstuffs seized or surrendered

Stones of Fish	...	90	Fruits	...	8197 lbs
Tins & Jars of Miscellaneous Foods	23306		Vegetables	...	13118 lbs
Imported Tinned Tongue & Ham (tins)	711		Miscellaneous Foods	...	122 lbs

Number of Visits to Inspect Food

Meat Shops	...	91	Fish Market	...	48
Provision Shops	...	303	Fish Siding	...	76
Meat Market	...	41	Miscellaneous	...	140

Details of Carcases rejected for diseases other than Tuberculosis.

Cattle

Septic Pericarditis	1	Oedema	1
Septicaemia	1		
		Total	<u>3</u>

Sheep

Gangrene	1	Emaciation	7
Oedema	23	Severe Bruising	3
Dadly bled	2	Moribund	11
Septic Pericarditis	1	Septicaemia	1
Decomposition	12	Mucoid Degeneration	1
Fevered	4	Multiple Abscesses	5
Found Dead	12	Septic Peritonitis	1
		Total	<u>39</u>

Calves

Immaturity	2	Joint Ill	2
Oedema	3	White Scour	3
Dadly Bled	1	Jaundice	2
Severe Bruising	1	Moribund	1
Septic Pneumonia	1	Septic Peritonitis	2
		Total	<u>23</u>

Pigs

Septic Peritonitis	5	Septic Pneumonia	1
Septic Pleurisy	1	Fevered	13
Septicaemia	1	Oedema	4
Multiple Abscesses	9	Moribund	2
Rickets and Emaciation	4	Dadly Bled	1
Found Dead	4		
		Total	<u>45</u>

M E A T I N S P E C T I O N

TABLE 5

Carcases Inspected and Condemned

	Cattle Excl'g Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	7026	3581	611	78083	11693	-
Number inspected	7026	3581	611	78083	11693	-
ALL DISEASES EXCEPT TUBERCULOSIS:						
Whole carcasses condemned	1	2	23	89	45	-
Carcases of which some part or organ was condemned ,	4210	2385	6	7461	1452	-
Percentage of the number inspected with disease other than tuberculosis	59.92	66.60	0.99	9.55	12.41	-
TUBERCULOSIS ONLY:						
Whole carcasses condemned	2	3	-	-	5	-
Carcases of which some part or organ was condemned	365	401	1	-	153	-
Percentage of the number inspected affected with tuberculosis ..	5.19	11.19	0.16	-	1.30	-
CYSTICERSOSIS:						
	Cows		Heifers		Steers	
Carcases of which some part or organ was condemned	5		8		14	
Carcases submitted to treatment by refrigeration	5		8		14	
Generalised and totally condemned	-		-		-	

INSPECTION OF FOOD PREMISES

There are within the Borough the following food premises:-

Grocers	636
Greengrocers and Wet Fish Shops ...	90
Butchers	140
Cooked Meat Premises (Other than butcher) ...	19
Bakers and Confectioners ...	203
Fried Fish Shops ...	135
Cafes and Snack Bars ...	76

The following table shows the numbers and types of premises registered under :-

(a) Food and Drugs Act, 1955.

Manufacture of Ice-Cream ...	46
Storage and Sale of Ice-Cream ...	412
Manufacture of Sausages	37
Manufacture of Sausages and Cooked Meats ...	93
Manufacture of Cooked Meats	19
Manufacture of Meat Pies and Potted Meat ...	120

(b) Milk and Dairies (General) Regulations, 1959.

Number of Registered Dairies	13
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FOOD HYGIENE REGULATIONS 1955

CLEAN FOOD BYELAWS

Summary of Premises visited

Dutchers and cooked food premises	140
Cafes and snack bars etc. ...	189
Grocers	876
Bakehouses ...	348
Fish Fryers and Crisp Fryers	79
Greengrocers	87
Confectioners	18
Vehicles	8
Miscellaneous	11

Number of premises inspected	562	Total Visits	1756
No. found satisfactory	217	No. found unsatisfactory	345
No. of re-visits to unsatisfactory premises			1194
No. of premises made satisfactory			465

FOOD HYGIENE

During 1959, a total of 1,756 visits were made to Food Premises (excluding market stalls). Of these, 562 were first inspections of premises, the remainder being re-visits to check progress. On average, therefore, it will be seen that when defects have been found, two further visits are required before the premises can be regarded as satisfactory. In only one instance were conditions so bad as to warrant consideration of legal proceedings. This was in the case of the proprietor of a recently opened cafe who started off full of enthusiasm but whose ideas of food hygiene were not those of the local authority. Despite numerous attempts to secure his co-operation, there was little improvement, and at the end of the year the facts were reported to the Town Clerk. This, fortunately, is an exception; most food traders have a reasonable standard of hygiene and co-operate well with the local authority.

Special attention has been paid during the year to butchers' premises. Whilst personal hygiene at these premises is excellent, many premises fall below standard due to traders having been advised not to carry out alterations until their premises had been inspected. By the end of the year, approximately half the total butchers' premises had been inspected, whilst in many cases the defects thus found had already been rectified.

FOOD HYGIENE REGULATIONS 1955.

Details of Contraventions found.

TABLE 6

	Found	Remedied
Food Premises		
Dirty Equipment	73	47
Equipment in bad repair	66	44
Equipment not protected from contamination	33	30
Food placed as to involve risk of contamination	110	141
Persons with dirty clothing	1	1
Persons smoking in food rooms	3	3
Persons with exposed cuts	3	3
SANITARY CONVENIENCES:		
Not clean	64	75
Not ventilated	-	3
Not in working order	21	11
Not lighted	173	210
In direct communication	-	1
No "wash hands" notices	250	342
No door fasteners	15	14
Absence of suitable wash hand basin	82	134
Absence of constant hot water	36	100
Absence of constant cold water	21	69
Absence of soap or detergent	15	49
Absence of nail brushes	52	80
Absence of clean towels, etc.	16	34
Absence of suitable first aid materials	139	156
Absence of suitable accommodation for clothing	30	41
Absence of suitable sink	25	50
Absence of constant hot water to sink	20	26
Absence of constant cold water to sink	4	13
Absence of clean cloths for drying	2	2
Sinks not clean and in working order	3	3
FOOD ROOMS		
Not efficiently lighted	10	5
Not sufficiently ventilated	43	33
Walls not clean	256	277
Walls not in good repair	146	139
Floors not clean	85	92
Floors not in good repair	108	89
Doors not clean	78	87
Doors not in good repair	60	55
Windows not clean	65	62
Windows not in good repair	48	41
Woodwork not clean	101	99
Woodwork not in good repair	35	37
Ceilings not clean	213	238
Ceilings not in good repair	106	103
Infestations by rodents	1	1
insects	1	1
birds	1	1
Accumulation of refuse	19	18
Yards not clean	2	2
STALLS:		
No name and address of owner	1	1
Not suitably screened	1	1
Not clean	1	1
Foodstuffs not protected from contamination	16	16

	<u>Found</u>	<u>Remedied</u>
<u>TRANSPORT AND CARRYING OF MEATS:</u>		
Persons without proper head covering	1	1
Van floor not impervious and no duckboards	1	-
Van floor dirty	1	1
Dirty condition of offal bin	1	1
Meat not protected in transit	1	3
Washing facilities not provided	2	1

Manufacture of Sausages, Potted, Pressed, Pickled or Preserved Food

Number of applications received	3
Number of applications granted	3
Number of applications refused	-

Food Poisoning. Ninety-three cases of food poisoning were discovered during the year.

Merchandise Marks Act, 1926. One thousand four hundred and thirty-two visits were made to shops and stalls.

Fertiliser and Feeding Stuffs Act, 1926. Three formal and six informal samples of feeding stuffs and fertilisers were examined by the Analyst during the year. Eight samples were satisfactory, and one showed differences in the statutory statements outside the limits of variations permitted.

Food and Drugs, 1955. During the year one hundred and five samples of milk were submitted to the Public Analyst. Of these, eight were reported as not genuine. In addition, out of a further one hundred and seventy-nine samples of other foods and drugs, nine were reported as adulterated, making a total of seventeen.

The following table shows the action taken respecting the seventeen samples reported not genuine.

FOOD & DRUGS ACT, 1955.

Action taken in regard to samples
reported not genuine.

TABLE 7

Article Sampled	No. of Sample	Formal	Informal	Analyst's Report	Action taken
MILK	752	F		Contained not less than 2% Extraneous water. Fat 3.35%. S.N.F. 8.20%. Freezing point 0.518 deg. C.	Letter of warning to producer. Further samples taken and found satisfactory.
MILK	782	F		Contained not less than 3% Extraneous water. Fat 3.40%. S.N.F. 8.05%. Freezing point - 0.512 deg. C.	Vendor charged with selling milk containing extraneous water.
MILK	783	F		Contained not less than 2% Extraneous water. Fat 4.05%. S.N.F. 8.00%. Freezing point - 0.518 deg. C.	Defendent pleaded guilty, and was fined \$15 with \$4.4.0. costs.
	784	F		Contained not less than 3% Extraneous water. Fat 3.20%. S.N.F. 8.10. Freezing point - 0.513 deg. C.	
MILK (Homogenised)	785		I	Contained not less than 12% extraneous water. Fat 2.85%. S.N.F. 7.45%. Freezing point - 0.462 deg C.	Formal sample taken and found satisfactory. Vendor cautioned.
Special Cough Candy	780	F		Sample did not comply with the Pharmacy and Medicine Act - Section II	Vendor interviewed and cautioned. Display label removed.
Vitagrain	804	F		Sample had deteriorated owing to high moisture content.	Vendor interviewed. Remaining stocks destroyed.
Jam and Cream Sandwich Cake	809	F		The substance resembling cream with which the sample had been filled consisted of imitation cream devoid of milk fat. Description misleading.	Proceedings instituted under Section 47 of the Food and Drugs Act - Defendant fined \$10
Whole Orange	933	F		This sample should be described as "Whole Orange Drink". The description "Whole Orange" could give the impression that the sample consisted solely of orange, whereas not more 1/20 of the sample consisted of orange.	Discussed with Manufacturer.
Line-flavoured Jelly	942		I	Sample failed to satisfy the setting test prescribed in the Food Standards (Table Jelly) Order, 1949.	Manufacturer cautioned.
Jam and Cream Sandwich Cake	950	F		Jam and Cream Sandwich filled with imitation cream.	Vendor cautioned.
Cream Trifle	952	F		Trifle covered with imitation cream.	Vendor cautioned.

Article Sampled	No. of Sample	Formal	Informal	Analyst's Report	Action taken
MILK	954	F		Contained 3% Extraneous water. Fat 3.4%. S.N.F. 8.45%. Freezing point 0.514 deg. C.	Vendor charged with selling milk containing extraneous water. Defendant pleaded guilty, and was fined £20, with £4.4.0 cost.
MILK	956	F		Contained 4% Extraneous water. Fat 3.70%. S.N.F. 7.90%. Freezing point 0.505 deg. C.	
MILK	957	F		Contained 8% Extraneous water. Fat 3.30%. S.N.F. 7.95%. Freezing point 0.487 deg. C.	
Soft Drink	7	F		Contained two preservatives.	Manufacturer cautioned.
Chocolate Liqueurs	982	F		Contained less than 0.1% of alcohol.	Under consideration for legal proceedings

FOOD & DRUGS ACT, 1955.

Other Legal Proceedings.

OFFENCE

ACTION TAKEN

- | | |
|---|---|
| 1. Selling a bottle of a soft drink which contained mould growth. | Defendants pleaded guilty and were fined £5. |
| 2. Having in possession for sale for human consumption 10 fowls that were unfit for human consumption by reason of decomposition. | Fowls seized and condemned by bench of Justices of the Peace.
Fined £20. |
| 3. Consigning to another person for sale for human consumption 10 fowls that were unfit for human consumption by reason of decomposition. | Fined £20. |

PART IV

INFECTIOUS DISEASES

TABLE 8

CASES OF INFECTIOUS DISEASE DURING THE YEAR 1959

NOTIFIABLE DISEASE		Number of Notifications received	Number of Cases in which Diagnosis was subsequently corrected	Corrected Number of noti- fications	Number Admitted to Hospital	Number Died
Meningococcal Infection	...	1	-	1	1	-
Cholera	...	-	-	-	-	-
Diphtheria (Including Membranous Group)	...	-	-	-	-	-
Erysipelae	...	2	-	2	-	-
Scarlet Fever	...	150	-	150	36	-
Typhus Fever	...	-	-	-	-	-
Enteric Fever	...	-	-	-	-	-
Fuerperal Pyrexia	...	97	-	97	20	-
Ophthalmia Neonatorum	...	-	-	-	-	-
Pulmonary Tuberculosis	...	51	1	50	-	-
Other Forms of Tuberculosis	...	9	-	9	-	-
Poliomyelitis (Paralytic)	...	-	-	-	-	-
Poliomyelitis (Non-Paralytic)	...	-	-	-	-	-
Dysentery	...	642	5	641	38	-
Malaria	...	-	-	-	-	-
Pneumonia (Acute Primary and Acute Influenzal)	...	45	-	45	1	-
Whooping Cough	...	47	2	45	6	-
Measles	...	443	1	442	4	-
Chickenpox	...	-	-	-	-	-
German Measles	...	-	-	-	-	-
Periphagus Neonatorum	...	-	-	-	-	-
Food Poisoning	...	84	6	80	5	-
Gastro-Enteritis	...	-	-	-	-	-
Undulant Fever	...	-	-	-	-	-
Encephalitis Lethargica	...	-	-	-	-	-
TOTALS		1571	15	1562	111	-

TABLE 9

NUMBER OF CASES OF INFECTIOUS DISEASES
NOTIFIED FROM 1950 to 1959

DISEASE	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
Smallpox.	-	-	-	-	-	-	-	-	-	-
Diphtheria (including Membranous Croup)	-	-	-	-	-	-	-	-	-	-
Erysipelas	9	3	8	11	4	7	7	1	2	2
Scarlet Fever	74	100	319	374	94	62	31	25	104	150
Enteric Fever	1	-	-	-	-	-	-	3	-	-
Puerperal Pyrexia	21	49	106	99	102	98	95	86	90	97
Typhus Fever	-	-	-	-	-	-	-	-	-	-
Cerebro-Spinal Meningitis	-	-	-	1	-	1	-	-	-	-
Poliomyelitis (Paralytic)	4	7	3	2	-	3	3	7	2	-
Poliomyelitis (Non-Paralytic)	1	1	1	1	1	1	1	1	1	-
Pulmonary Tuberculosis	65	90	94	104	87	77	66	49	80	51
Other Forms of Tuberculosis	16	16	15	21	8	7	6	5	7	9
Ophthalmia Neonatorum	1	2	6	1	1	2	2	2	1	-
Measles	1787	498	674	1431	250	1759	617	811	1370	443
Encephalitis Lethargica	-	-	-	-	-	-	1	-	-	-
Dysentery	55	72	19	50	17	1097	115	365	86	642
Malaria	-	-	-	-	-	2	-	-	-	-
Pneumonia	55	109	73	88	102	73	88	151	58	45
Diarrhoea	6	-	-	4	1	-	-	-	-	-
Whooping Cough	180	131	290	362	111	48	498	65	38	47
TOTALS	2275	1078	1608	2549	770	3237	1589	1571	1839	1486

++ Notifiable from July 1st to October 31st

+ From 1952 figures are of corrected notifications

PART V

STATISTICAL TABLES

1. 1910-1911
2. 1911-1912
3. 1912-1913
4. 1913-1914
5. 1914-1915
6. 1915-1916
7. 1916-1917
8. 1917-1918
9. 1918-1919
10. 1919-1920
11. 1920-1921
12. 1921-1922
13. 1922-1923
14. 1923-1924
15. 1924-1925
16. 1925-1926
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SECTION 22: CARE OF EXPECTANT AND NURSING MOTHERS
AND CHILDREN UNDER SCHOOL AGE

TABLE 10

ANTE-NATAL AND POST-NATAL CLINIC ATTENDANCES

Clinic (1)	Sessions held per month		Women in attendance		Total Number of Attendances during the year	
	Medical Officers (2)	Midwives (3)	No. who attended during year (4)	New Cases included in Col (4) (5)	Medical Officer Sessions (6)	Midwives Sessions (7)
ANTE-NATAL Victoria Street	20	-	650	509	3908	-
District Nurses' Home	4	28	877	700	255	4353

In addition 82 attendances were made for post-natal examination.

TABLE 11

EXAMINATIONS CARRIED OUT AT ANTE-NATAL CLINICS

	Victoria Street	St. Peter Street	Total
Rh. Factor - Women	462	617	1079
- Men	38	22	60
Kahn Test - Women	440	561	1001
- Men	38	21	59
Wasserman Test - Women	4	9	13
- Men	-	-	-
Haemoglobin Estimation	795	1263	2058
Sugar Tolerance	2	-	2
Hogben Tests	6	2	8
Other Tests	23	-	23
Referred to Venereal Diseases Clinic ...	77	32	109
" " Heart Clinic	20	6	26
" " Obstetrician	114	29	143
" for X-Ray (Chest)	498	548	1046
" " X-Ray (Pelvimetry)	-	-	-
Full Blood Counts	10	46	56

TABLE 12
MEDICAL CONSULTATION CLINIC

Number of Clinics held	22
Number of New Cases	30
Number of Re-Attendances	10

The following diagnoses were arrived at -

Patient Ventricular Septum	1	Mitral Stenosis	1
Thyroid Toxicosis.	2	Coronital Heart	1
Functional Systolic Murmur	1	Epilepsy	1
Enlarged Thyroid..	1	Normal Hearts	20
Coronary Heart Disease	1	Hypertension	1

TABLE 13
OBSTETRIC CONSULTANT CLINIC

Number of Sessions	22
Number of New Cases	142
Number of Re-Attendances	52

TABLE 14
DENTAL TREATMENT

	Number provided with Dental Care				Forms of Treatment Provided						
	Examined	Needing Treatment	Treated	Made Dentally Fit	Scalings and Gum Treatment	Fillings	Extractions	General Anaesthetics	Dentures		Radiographs
Expectant and Nursing Mothers	187	164	125	102	22	72	324	52	23	7	3
Children under five years old	364	157	139	129	-	13	269	45	-	-	-

TABLE 15

ATTENDANCES AT CHILD WELFARE CENTRES

	St. Luke's	Hozier Street (2 Sessions weekly)	All Saints	Richmond Terrace	Griffin	Cornelian Street	Bentham Road	Guide	Longshaw	Newton Street	Leamington Road	Palm Street	Glennace Cres- cent	Total
INFANTS - New Cases under One Total number attending during the year	93	149	95	122	135	95	80	26	91	121	142	108	108	1365
Attendances -Under 1 -Over 1	1741 701	2791 1694	1424 628	1971 757	3177 1232	2001 931	1812 715	384 301	2056 879	2277 637	2562 990	2097 863	2133 1383	26426 11711
Total Attendances of Infants	2442	4485	2052	2728	4409	2932	2527	685	2935	2914	3552	2960	3516	38137
Consultations with Doctor	600	922	465	660	911	650	470	171	693	723	668	676	533	8142
EXPECTANT MOTHERS Number of New Cases Number of re-attendan- ces	43 112	48 123	8 42	17 79	37 110	11 60	18 36	5 6	2 22	9 32	11 54	39 124	21 96	269 896
Total attendances of Expectant Mothers	155	171	50	96	147	71	54	11	24	41	65	163	117	1165
Average Attendance of Infants per session	51	46	42	56	90	62	55	28	58	58	77	63	70	

+ Kendal Street closed 31.3.59. and Richmond Terrace opened from 1.4.59.

TABLE 16

PARTICULARS OF DAY NURSERIES

	Holden House	Church Hill House	Stanciliffe Street	Lincoln Street	Albion Street	T O T A L
Number of Approved Places -						
0 - 2 Years	5	8	8	8	8	37
2 - 5 Years	26	34	40	44	40	184
Totals	31	42	48	52	48	221
Number of Children on the Register at end of Year -						
0 - 2 Years	13	9	12	10	17	61
2 - 5 Years	12	32	36	33	33	146
Totals	25	41	48	43	50	207
Total Attendances during the Year -						
0 - 2 Years	1594	2165	2256	1973	2434	10422
2 - 5 Years	3101	5330	5458	5746	4965	24600
Totals	4695	7495	7714	7719	7399	35022

TABLE 17
NUMBERS AND CAUSES OF STILLBIRTHS
PREMATURE BIRTHS AND NEO-NATAL DEATHS

STILL BIRTHS		PREMATURE BIRTHS		NEO-NATAL DEATHS	
Foetal States	7	Multiple Pregnancy	16	Foetal States	7
Maternal States	30	Toxaemia of Mother	13	Prematurity	15
		Rh. Factor	5	Post-Natal Causes	7
		Others	15		
		Not known	83		
Total	37	Total	132	Total	29

Ophthalmia Neonatorum: No case was notified during the year.

Puerperal Pyrexia: Forty-eight Borough cases were notified during the year, none of which terminated fatally.

Notification of Births:

	Live Births	Still Births	Total
Doctors	-	-	-
Midwives	567	2	569
Parents and Others	1374	67	1441
Totals . . .	1941	69	2010

SECTION 23 : DOMICILIARY MIDWIFERY

	Doctor present at time of delivery of child	Doctor not present at time of delivery of child
No. of Confinements attended:	29	539
No. of cases in which "Trilene" was administered:	23	453
No. of cases in which Gas/Air was administered:	Nil	Nil
No. of cases in which Pethidine was administered:	16	141

TABLE 18
HOME VISITS BY THE HEALTH VISITORS

	Supt HV	Dist 1	Dist 1A	Dist 2	Dist 3	Dist 4	Dist 5	Dist 6	Dist 6A	Dist 7	Dist 7A	Dist 8	Dist 9	Dist 10	Dist 11	Dist 12	Spec Dist	Total
Visits to Exp. Mothers -																		
First Visits ...	20	3	5	4	6	16	26	22	30	5	18	1	21	40	2	17	11	247
Re-Visits . . .	8	11	-	1	8	17	61	24	18	22	23	1	22	25	24	15	49	329
Infants under One -																		
First Visits ...	-	84	98	138	163	91	88	99	70	65	87	80	111	144	63	84	43	1508
Re-Visits . . .	-	307	199	217	665	226	310	293	396	265	211	262	469	418	340	366	413	5357
Infants aged One Year	-	227	41	207	319	152	302	280	319	223	209	178	315	180	252	333	222	3759
Children 2 - 5 Years ..	-	216	76	485	391	277	671	496	141	272	288	185	471	377	311	246	291	5194
Maternity Assessment ..	-	14	13	34	27	19	19	10	24	8	3	116	27	25	15	11	7	272
Care and After-Care ..	-	194	82	118	243	68	78	134	629	315	188	228	151	202	184	160	202	3083
Care of the Aged . . .	-	22	38	100	42	27	63	48	4	3	35	31	45	133	69	33	59	752
Tuberculosis ..	-	54	22	76	99	55	234	152	157	47	12	93	124	106	72	54	51	1408
Stomach ..	-	1	-	4	8	3	5	3	1	4	2	2	1	2	1	8	-	45
Chronic Sick ..	-	5	7	-	1	5	2	18	3	-	8	-	7	1	8	18	8	91
Minor Infectious Diseases	-	5	35	56	115	14	14	100	104	27	38	130	79	117	18	48	9	909
Deaths ..	-	-	2	4	2	1	3	5	-	-	1	-	1	-	-	-	-	19
Miscellaneous Visits ..	-	5	12	18	12	12	50	10	-	-	-	5	4	15	-	1	-	144
Totals	28	1148	630	1462	2101	983	1926	1694	1896	1256	1123	1212	1848	1792	1259	1394	1365	23117
Ineffective Visits	2	293	89	349	401	273	221	110	325	96	197	284	759	386	37	154	174	4150
Grand Total	30	1441	719	1811	2502	1256	2147	1804	2221	1352	1320	1496	2607	2178	1296	1548	1539	27267

Number of Children under five years of age visited during the year 6079
Total Number of Families or Households visited by the Health Visitors 6665

TABLE 19

CLINIC SESSIONS ATTENDED

	Supt. H.V.	Dist. 1	Dist. 1A	Dist. 2	Dist. 3	Dist. 4	Dist. 5	Dist. 6	Dist. 6A	Dist. 7	Dist. 7A	Dist. 8	Dist. 9	Dist. 10	Dist. 11	Dist. 12	Special Dist.	Total
Maternity Child Welfare Centres	-	45	32	79	83	99	55	154	60	50	52	83	65	72	84	43	49	1105
Ante- Natal	318	37	14	3	143	22	-	-	-	7	-	22	28	-	5	-	-	599
Special V.D.	44	24	-	-	-	-	-	-	-	-	-	3	-	28	-	-	-	99
Other	19	-	-	-	-	-	-	-	-	-	-	-	-	3	-	-	-	22
Consult- ant	39	13	6	11	10	15	12	13	18	9	6	16	17	23	19	10	19	256
Totals	420	119	52	93	236	136	67	167	78	66	58	124	110	126	108	53	68	1991

SECTION 25 : H O M E N U R S I N G

TABLE 20

Cases Outstanding on 1st, January, 1959	...	...	...	...	736
New Cases ..	...	...	...	...	2294
Number of Visits	...	...	...	...	81829
Cases outstanding on 31st December, 1959	...	...	...	...	664

TABLE 21

Type of Case	Number of	
	Cases	Visits
Medical	2409	65073
Surgical	500	14411
Infectious Disease	1	6
Tuberculosis	30	1163
Maternal Complications	90	1176
Totals	3030	81829
Patients included in the above who were over 65 at the time of the first visit	1453	51790
Children included in the above who were under 5 years of age at the time of the first visit	104	899
Patients who have had more than 24 visits during the year	791	62599
Patients included in the above who have had an enema prior to X-Ray	397	412
Patients included in the above who have had injections only	949	33381

SECTION 26: VACCINATION AND IMMUNISATION

TABLE 22

SMALLPOX VACCINATION BETWEEN 1951 AND 1959

Age Group	1951	1952	1953	1954	1955	1956	1957	1958	1959
Under 1 Year ..	328	275	391	417	518	512	602	626	403
1 Year	22	19	32	20	37	17	25	50	281
2 Years	8	11	13	6	18	20	16	18	11
3 Years	5	10	8	5	8	27	11	18	12
4 Years	4	5	5	5	9	19	8	-	12
5 - 14 Years ..	25	28	54	22	23	54	61	30	40
15 and over ...	265	430	668	139	288	241	417	157	119
Totals ..	657	778	1171	614	901	890	1140	899	878

TABLE 23

WHOOPIING COUGH IMMUNISATION

Age	1951	1952	1953	1954	1955	1956	1957	1958	1959
Under 1 Year ..	67	92	340	830	807	840	876	876	849
1 Year	237	245	287	247	153	104	82	136	121
2 Years	35	42	23	61	36	30	21	29	55
3 Years	9	11	13	23	22	10	7	16	15
4 Years	4	2	8	12	8	4	5	7	10
Over 4	9	6	10	10	5	5	3	4	6
Totals ..	361	398	681	1183	1031	993	994	1070	1056

DIPHTHERIA IMMUNISATION TABLE 24

IMMUNISATION IN RELATION TO CHILD POPULATION

Number of children at 31st December, 1959, who had completed a course of Immunisation at any time before that date (i.e. at any time since 1.1.1945)

Age at 31.12.59 i.e. Born in year	Under 1 1959	1 - 4 1958-1955	5 - 9 1954-1950	10 - 14 1949-1945	Under 15 Total
Last complete course of injections (whether primary or booster)					
A. 1955 - 1959	290	4033	1952	2629	8904
B. 1954 or earlier	-	-	3228	4673	7901
C. Estimated mid-year Population	1600	5800		14700	22100
Immunity Index (100 A/C) ..	18%	69%		31%	40%

TABLE 25

DIPHTHERIA ELIMINATION

CERTIFICATES COMPLETED EACH YEAR FROM 1942 TO 1959

Age in years on 31st December of corresponding year	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
1	543	762	667	930	866	959	1237	1030	1016	1087	989	982	1162	1012	992	997	1038	981
2	306	187	145	136	108	157	77	78	73	80	61	47	64	39	33	23	30	60
3	330	174	57	76	80	48	48	125	71	35	41	47	35	24	17	15	19	16
4	382	212	101	117	113	150	103	40	64	52	74	99	75	34	37	22	12	21
5	256	215	106	160	106	123	91	24	155	96	131	182	120	87	73	49	12	22
6	168	187	100	130	86	155	77	45	55	92	132	193	109	74	74	37	8	29
7	127	115	78	125	116	117	70	30	49	76	86	129	73	44	55	24	3	15
8	97	128	71	120	85	106	68	20	28	56	89	88	57	39	37	17	5	7
9	87	118	79	113	77	103	77	15	19	32	58	68	44	17	20	10	4	11
10	73	99	71	127	59	89	61	9	18	34	65	70	45	21	18	22	2	88
11	47	58	31	113	57	72	52	32	14	31	49	31	30	14	7	4	-	89
12	26	33	24	159	49	76	9	24	12	12	35	23	46	19	8	-	-	141
13	20	36	33	148	35	58	8	35	8	13	55	32	44	21	5	-	-	93
14	-	11	5	64	8	31	10	24	11	6	55	23	47	10	8	1	-	62
15	-	-	3	-	-	4	-	4	-	-	-	-	15	7	3	-	-	32
Totals	2462	2335	1571	2518	1845	2248	1988	1535	1593	1702	1920	2014	1966	1462	1387	1221	1133	1667

TABLE 26

COMPLETED POLIO MYELITIS VACCINATIONS
DURING 1956, 1957, 1958 & 1959.

	Year of Birth	1st & 2nd Injections				Totals	3rd Injections		Totals
		1956	1957	1958	1959		1958	1959	
CHILDREN'S GROUPS	1943	-	-	295	111	406	-	320	320
	1944	-	-	527	170	697	-	393	393
	1945	-	-	498	197	695	-	435	435
	1946	-	-	496	336	832	-	434	434
	1947	80	561	227	320	1188	279	495	774
	1948	71	495	212	291	1069	211	459	670
	1949	65	558	188	228	1039	153	457	580
	1950	48	425	189	226	888	44	448	492
	1951	48	259	270	257	834	43	458	501
	1952	16	134	334	307	791	16	448	464
	1953	4	69	498	359	930	6	443	449
	1954	2	42	388	318	750	4	462	466
	1955	-	-	453	306	759	1	442	443
	1956	-	-	522	373	895	2	482	484
	1957	-	-	425	404	829	-	450	450
	1958	-	-	53	695	748	-	273	273
	1959	-	-	-	47	47	-	-	-
		Total	334	2543	5575	4945	13397	729	6899	7628
Other Priority Groups	Health Department Staff	-	26	58	6	90	35	12	47
	General Practitioners	-	3	8	30	41	-	16	16
	Hospital Staffs	-	27	423	343	793	-	40	40
	Ante-Natal Patients	-	-	287	570	857	-	10	10
	Young Adults	-	-	97	4135	4232	-	393	393
	Grand Total	334	2599	6448	10029	19410	764	7370	9134

SECTION 27:

AMBULANCE SERVICE

TABLE 27

AMBULANCE RUNNING during the year ended 31st March, 1959.

1. No. of operational vehicles at 31.3.59:	
(a) Ambulances 2/4 stretchers	8
(b) Dual-purpose vehicles, 1 stretcher	3
(c) Sitting-Case vehicles	1
2. Total Mileage:	
(a) Ambulances 2/4 stretchers	94909
(b) Other vehicles	53582
	<u>148491</u>
3. No. of Persons Carried:	
(a) Accident or Emergency:	
Stretcher cases	1819
Sitting cases	1465
(b) Others:	
Stretcher cases	7319
Sitting cases..	24215
(c) Occupation Centre Children:	5204
	<u>40022</u>
4. Patients carried by Rail:	
(a) Number of Persons	7
(b) Mileage	1154
5. No. of operational staff	51
6. Number of Ambulance Stations	2
7. Population of Service Area	115160
8. Acreage of Service Area..	22088

SECTION 28: PREVENTION, CARE AND
AFTER CARE

TUBERCULOSIS - TABLE 28

Number of New Cases of Pulmonary Tuberculosis	57
Number admitted to Hospital - Pulmonary	41
Non-Pulmonary	4
Number Discharged from Hospital - Pulmonary	24
Number Died in Hospital	4
Number of Contact Examinations	1033
Number of Heaf's Multiple Puncture Tests of Contacts	153
Number negative and given B.C.G.	112
Number positive	14
Number of Annual Tests (M.P.) of children previously vaccinated	485
Mass Vaccination of School Children:	
No. of Invitations sent	1241
No. Accepted	740
No. Heaf Tested	721
No. Positive	188
No. Negative and Vaccinated	454
No. Heaf Tested after Vaccination	419
No. Positive	363

SECTIONS 28 & 51 : M E N T A L H E A L T H

TABLE 29

	In Hospital		Admissions		Deaths and Discharges		Others		Total	
	M	F	M	F	M	F	M	F	M	F
In Mental Hospitals on 1.1.59 ...	156	249							156	249
Admitted to Mental Section 1 ..			160	164					160	164
Hospitals 1/1/59) " 5 ..									-	-
to 31/12/59) " 16 ..			12	17					12	17
Left (Vol). 1/1/59 to 31.12.59 ..					133	153			133	153
Discharged 1/1/59 to 31/12/59 ...					36	34			36	34
Deceased 1/1/59 to 31/12/59 ...					16	23			16	23
In Queen's Park Hospital under observation 31/12/59							1	1		
(In Hospital 1/1/59	156	249							156	249
Totals(Admissions ...			172	181					172	181
(Discharges and Deaths ..					185	210			185	210
Under Observation Order, 31/12/59 ...							1	1		

ADMISSION OF PATIENTS TO HOSPITAL

(a) Under Lunacy and Mental Treatment Acts

	Section 20		Section 21		Section 16		Sec. 1		Sect. 5		Sec. 30 & 11	
	M	F	M	F	M	F	M	F	M	F	M	F
Queen's Park Hospital	57	54	3	-	-	-	144	146	-	-	-	-
Whittingham ...	1	2	1	3	12	16	16	15	-	-	-	-
Cheadle Royal ..	-	-	-	-	-	-	-	1	Private		-	-
Lancaster Moor	-	-	-	-	-	1	-	3	-	-	-	-
Totals	58	56	4	3	12	17	160	165	-	-	-	-

(b) Under Mental Deficiency Acts

There were seven admissions during 1959, three under Section 8, none under Section 3, one under Section 6, and three on an Informal Basis.

Two cases were admitted from the ordinary waiting list. Thus seven males and four females were still awaiting admission at the end of the year.

TABLE 30

Statistics, Lunacy and Mental Treatment Acts, 1890 - 1930.

	Male	Female	Total
Patients known to be in-patients of Mental Hospitals on January 1st	156	249	405
Observation cases admitted under Section 20, 21, and 11	62	59	121
Observation cases -			
Discharged not certifiable	9	9	18
Deceased whilst under observation ...	-	-	-
Made Voluntary or Informal Patients (inc. in (b) below).	45	43	88
Under Observation at Whittingham, Burnley General and Queen's Park Hospitals on 31st December	-	1	1
Cases admitted to Mental Hospitals -			
(a) Sections 16 and 30	12	17	29
(b) Voluntary	160	164	324
(c) Temporary	-	-	-
Voluntary cases admitted to Mental Hospitals by private (included in (b) above) arrangement	115	121	236
Certified Patients in Hospital before 1959 who are now "Informal Patients"	3	12	15
Discharged from Mental Hospitals during 1959	27	25	52
Left Mental Hospitals (Voluntary and Informal)	133	153	286
Deceased in Mental Hospitals during 1959	16	23	39
Cases investigated as Mental Illness but removed as sick persons	5	6	11
Cases investigated but no action taken	8	10	18
Visited up to December 31st:			
Social History of patient in hospital	15	25	40
Patients in connection with "after care"	156	218	374
Reported cases before removal to Mental Hospital	43	79	122
Cases other than Mental Illness	16	31	47
Following attendance of Mental Welfare Workers at Hospital Psychiatric Clinics		142	
Social Histories		200	
Visits		43	
Case Paper Conferences at Mental Health Offices, Blackburn & Accrington		46	
Other visits and removals		92	

TABLE 31

MENTAL DEFICIENCY ACTS, 1913 to 1938.

Particulars of Cases Reported during the year, 1959:		Under age 16		Over age 16	
(1) ASCERTAINMENT		M	F	M	F
<u>1. Particulars of cases reported during 1959:</u>					
(a) Cases ascertained to be defectives "subject to be dealt with" :-					
Number in which action taken on reports by:					
(1) Local Education Authorities on children:					
(i) While at school or liable to attend school					
		3	-	-	-
(ii) on leaving Special Schools		2	4	1	-
(iii) on leaving ordinary schools		-	-	-	-
(2) Police or by Courts		-	-	3	-
(3) Other Sources		1	-	1	-
Total of 1(a)		6	4	5	-
(b) Cases reported who were found to be defectives but were not regarded as "subject to be dealt with" on any ground					
		-	-	-	-
(c) Cases reported who were not regarded as defectives and are thus excluded from (a) or (b)					
		-	-	-	-
(d) Cases reported in which action was incomplete at 31st December, 1959, and are thus excluded from (a) or (b)					
		3	2	-	1
Total of 1(a) - (d)		9	6	5	1
<u>2. Disposal of cases reported during 1959:</u>					
(a) Of the cases ascertained to be defectives "subject to be dealt with" (i.e. at 1(a)); number:					
(i) Placed under Statutory Supervision					
		3	3	1	-
(ii) Placed under Guardianship					
		-	-	-	-
(iii) Taken to "Places of Safety"					
		-	-	-	-
(iv) Admitted to Hospitals					
		1	-	4	-
Total of 2 (a)		4	3	5	-
(b) Of the cases not ascertained to be defectives "subject to be dealt with", number:					
(i) Placed under Voluntary Supervision ...					
		2	1	-	-
(ii) Action unnecessary					
		-	-	-	-
Total of 2 (b)		2	1	-	-
(c) Cases reported at 1(a) or (b) above who removed from the area or died before disposal was arranged					
		-	-	-	-
Total of 2(a) - (c)		6	4	5	-

	Under Age 16		Over Age 16		Total
	M	F	M	F	
3. Number of mental defectives for whom care was arranged by the local health authority under Circular 5/52 during 1959 and admitted to -					
(a) National Health Service hospitals... ..	2	1	-	1	4
(b) Elsewhere	-	-	-	-	-
4. Total cases on Authority's Registers at 31.12.59.					
(i) Under Statutory Supervision	28	8	53	42	131
(ii) Under Guardianship	-	-	-	-	-
(iii) In "Places of Safety"	-	-	-	-	-
(iv) In Hospitals	8	3	83	70	164
Total of 4(i)-(iv)inc	36	11	136	112	295
(v) Under Voluntary Supervision	2	2	20	17	41
Total of 4(i)-(v)inc	38	13	156	129	336
5. Number of defectives under Guardianship on 31st December who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913, (included in 4(ii))	-	-	-	-	-
6. Classification of defectives in the Community on 31.12.59. (according to need at that date):					
(a) Cases included in 4(i) - (iii) in need of hospital care and reported accordingly to the hospital authy:					
(1) In urgent need of hospital care -					
(i) cot and chair cases	2	1	-	2	5
(ii) ambulant low grade cases	-	4	1	-	5
(iii) medium grade cases	-	1	-	-	1
(iv) high grade cases	-	-	-	-	-
Total (Urgent cases).	2	6	1	2	11
(2) Not in urgent need of hospital care -					
(i) cot and chair cases	-	-	-	-	-
(ii) ambulant low grade cases	-	-	-	-	-
(iii) medium grade cases	-	-	-	-	-
(iv) high grade cases	-	-	-	-	-
Total non-urgent cases	-	-	-	-	-
Total of Urgent and Non-Urgent Cases ...	2	6	1	2	11
(b) Of the cases included in items 4(i),(ii),and (v), number considered suitable for -					
(i) occupation centre	22	3	4	5	34
(ii) industrial centre	-	-	7	8	15
(iii) home training	1	-	3	3	7
Total of 6 (b)	23	3	14	16	56
(c) Of the cases included in 6(b), number receiving training on 31.12.59: -					
(i) in occupation centre	21	3	4	5	33
(ii) in industrial centre	-	-	-	-	-
(iii) from a home teacher in groups	-	-	-	-	-
(iv) from a home teacher at home	1	-	3	3	7
Total of 6 (c)	22	3	7	8	40

During 1959:-

	Male	Female	Total
Patient re-admitted to Hospital "Licence revoked"	-	-	-
" discharged from the order and detained in Hospital on an "Informal Basis"	28	24	52
" died in Hospital	1	-	1
" discharged from the order	4	3	7
" left Hospital "on an Informal Basis"	-	1	1
" released from Hospital on Licence	2	3	5
" absconded from "Licence"	-	1	1
" admitted to Hospital on Order	3	1	4
" admitted to Hospital on an Informal Basis	2	1	3
" (Other Authorities) Placed on Licence in County Borough of Blackburn	-	8	8
Total No. of Patients known to be in Hospital on an "Informal Basis" on 31.12.59	42	35	77
Patients under Statutory or Voluntary Supervision who were in employment on 31.12.59	57	37	94

TABLE 32

HOME TEACHING

	Male	Female	Total
1. Number of patients receiving home tuition at end of year	4	3	7
2. Patients removed from Register unsuitable or transferred to Occupation Centre during the year	1	1	2
3. Sessions given during the year	211	158	369
4. Patients recommended for Home Teaching	-	-	-
5. Other Visits	4	-	4
6. Patients died	-	-	-

TABLE 33

VISITS PAID BY MENTAL WELFARE WORKERS TO MENTAL DEFECTIVES

	Male	Female	Total
To cases under Supervision, Voluntary and Statutory	144	76	220
To cases before removal to Hospital (Case Notes etc.)	9	7	16
To cases on licence, Home Reports &c. for cases under Institutional Care and on Short Licence	48	91	139
For Reports on behalf of Other Authorities	6	29	35
At Request of Mental Deficiency Hospital	42	62	104

HOME HELP SERVICE

TABLE 34

Number of patients on books, 1st January, 1959 ...	350
Number of new patients	292
Total patients attended during year - Maternity ..	26
Others ..	648
Number of Helps employed at end of year	56
Cost of Service (Year ending 31st March, 1959 ...	£ 17,989
Amount recovered from patients	£ 2,957

MISCELLANEOUS STATISTICS

ACCIDENTS IN THE HOME

	In-Patients	Out-Patients	Slight	Severe	Deaths
BURNS AND SCALDS (164)					
Under 1 year	1	9	8	2	-
1 - 2	12	31	40	3	-
2 - 5	4	26	26	4	-
5 - 15	4	31	34	1	1
15 plus	4	57	54	7	2
Totals	25	154	162	17	3
INTERNAL POISONING (33)					
Under 1 year	-	1			-
1 - 2	4	9			-
2 - 5	5	14			-
5 - 15	2	3			-
15 plus	1	-			1
Totals	12	27			5

CREMATIONS

The Medical Officer of Health and Deputy Medical Officer of Health are the medical referees for the authorising of cremations under the Cremation Acts.

During 1959, 717 cremations were authorised.

RELAXATION CLASSES FOR EXPECTANT MOTHERS

No. of patients attended	...	...	...	270
No. of attendances	...	...	...	1733

RECUPERATIVE REST

Number of Cases	..	...	...	...	8
Gross Cost to Authority	...	...	...	...	£76. 0.0
Nett Cost to Authority	.	...	...	...	£39.10.0

MOTHERCRAFT CLASSES

No. of sessions	..	...	...	...	43
No. of attendances	...	...	...	...	779

LOAN OF MEDICAL EQUIPMENT

Articles loaned:

Bedpans	186	Urinals	76
Mackintosh Sheets	195	Bed Cages	23
Air Cushions	144	Back Rests	103
Air Beds	-	Chairs	10
Bed Tables	-	Crutches (pairs)	7
Commodore	2		

MEALS ON WHEELS

New Cases	..	...	...	...	114
Cases ceased	...	...	...	...	100
No. of cases supplied	...	...	...	...	216
No. of meals supplied	...	...	...	...	11,993